

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (2-21)**  
**STATE: NH**  
**APPLICATION YEAR: 2011**

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[Secs. 504 (d) and 505(a)(3)(4)]

\$ 10,682,767

**FORM NOTES FOR FORM 2**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form2\_Main  
**Field Name:** CDC  
**Row Name:** Other Federal Funds - CDC  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
Rape Prevention & Education \$ 154,737  
Early Hearing Detection & Intervention \$ 143.227

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: NH**

	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 2,065,063	\$ 2,017,856	\$ 2,017,904	\$ 2,017,856	\$ 2,017,856	\$ 1,997,739
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 6,419,828	\$ 5,821,519	\$ 6,772,394	\$ 6,408,767	\$ 6,804,855	\$ 6,536,359
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 152,000	\$ 351,588	\$ 870,000	\$ 729,101
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b>	\$ 8,484,891	\$ 7,839,375	\$ 8,942,298	\$ 8,778,211	\$ 9,692,711	\$ 9,263,199
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 745,052	\$ 627,988	\$ 786,473	\$ 627,647	\$ 777,899	\$ 762,133
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 9,229,943	\$ 8,467,363	\$ 9,728,771	\$ 9,405,858	\$ 10,470,610	\$ 10,025,332
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: NH**

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 1,997,739	\$ 2,002,759	\$ 2,002,939	\$	\$ 2,002,759	\$
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 7,170,215	\$ 6,381,079	\$ 6,733,801	\$	\$ 7,122,044	\$
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 870,000	\$ 684,495	\$ 870,000	\$	\$ 870,000	\$
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
<b>7. Subtotal</b>	\$ 10,037,954	\$ 9,068,333	\$ 9,606,740	\$ 0	\$ 9,994,803	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 755,805	\$ 757,653	\$ 790,387	\$	\$ 687,964	\$
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 10,793,759	\$ 9,825,986	\$ 10,397,127	\$ 0	\$ 10,682,767	\$ 0
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Form3\_Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2009  
**Field Note:**  
The difference between FY 2009 Budget & Expended can be attributed to ongoing cost saving measures, reductions in State funding, and reorganization.  
  
In addition, the budget for FY 2009 included in error, general funds that were intended for other non MCH activities. As well as positions that were subsequently funded by other sources.
2. **Section Number:** Form3\_Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2009  
**Field Note:**  
Newborn Screening Program - Other Funds  
There was an increase in the charge for filter paper, resulting in increased revenue. Subsequently the contract for newborn screening was later increased.
3. **Section Number:** Form3\_Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
Contract expenditures were less than anticipated.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: NH**

	FY 2006		FY 2007		FY 2008	
<b>I. Federal-State MCH Block Grant Partnership</b>	<b>BUDGETED</b>	<b>EXPENDED</b>	<b>BUDGETED</b>	<b>EXPENDED</b>	<b>BUDGETED</b>	<b>EXPENDED</b>
a. Pregnant Women	\$ 562,551	\$ 595,570	\$ 558,718	\$ 648,669	\$ 713,863	\$ 756,213
b. Infants < 1 year old	\$ 933,203	\$ 974,751	\$ 945,315	\$ 1,059,235	\$ 1,212,814	\$ 1,256,990
c. Children 1 to 22 years old	\$ 2,688,674	\$ 2,698,353	\$ 2,877,209	\$ 2,911,790	\$ 3,732,204	\$ 3,642,558
d. Children with Special Healthcare Needs	\$ 2,886,836	\$ 2,282,341	\$ 2,814,428	\$ 2,811,972	\$ 2,490,888	\$ 2,240,801
e. Others	\$ 1,030,535	\$ 854,265	\$ 1,092,946	\$ 1,020,259	\$ 1,048,232	\$ 1,022,825
f. Administration	\$ 383,092	\$ 434,095	\$ 653,682	\$ 326,286	\$ 494,710	\$ 343,812
g. SUBTOTAL	\$ 8,484,891	\$ 7,839,375	\$ 8,942,298	\$ 8,778,211	\$ 9,692,711	\$ 9,263,199
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 100,000		\$ 140,000		\$ 140,000	
d. Abstinence Education	\$ 94,901		\$ 94,901		\$ 94,901	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 330,151		\$ 331,572		\$ 322,998	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
NH Univ Newborn Hear	\$ 0		\$ 0		\$ 120,000	
N Univ Newborn Hear	\$ 0		\$ 120,000		\$ 0	
NH Univ Newborn He	\$ 120,000		\$ 0		\$ 0	
III. SUBTOTAL	\$ 745,052		\$ 786,473		\$ 777,899	

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: NH**

	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 728,624	\$ 718,602	\$ 712,920		\$ 763,762	
b. Infants < 1 year old	\$ 1,246,191	\$ 1,199,801	\$ 1,214,601		\$ 1,285,982	
c. Children 1 to 22 years old	\$ 3,902,334	\$ 3,521,064	\$ 3,765,239		\$ 3,863,084	
d. Children with Special Healthcare Needs	\$ 2,534,100	\$ 2,352,891	\$ 2,909,998		\$ 3,041,788	
e. Others	\$ 1,086,790	\$ 935,487	\$ 551,070		\$ 561,147	
f. Administration	\$ 539,915	\$ 340,488	\$ 452,912		\$ 479,040	
g. SUBTOTAL	\$ 10,037,954	\$ 9,068,333	\$ 9,606,740	\$ 0	\$ 9,994,803	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 94,644		\$ 100,000	
c. CISS	\$ 140,000		\$ 140,000		\$ 140,000	
d. Abstinence Education	\$ 94,901		\$ 94,948		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 306,260		\$ 310,795		\$ 297,964	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
NH Univ Newborn Hear	\$ 120,000		\$ 150,000		\$ 150,000	
<b>III. SUBTOTAL</b>	\$ 755,805		\$ 790,387		\$ 687,964	



## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

1. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership

**Field Name:** CSHCNExpended

**Row Name:** CSHCN

**Column Name:** Expended

**Year:** 2008

**Field Note:**

Budget vs expended differs by more than 10% as a result of :  
Vacancies, budget reductions and cost saving measures taken during FY08.

- DW/LC

2. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership

**Field Name:** AllOthersBudgeted

**Row Name:** All Others

**Column Name:** Budgeted

**Year:** 2010

**Field Note:**

For future reference:

There is difference >10% in the budgeting of "Others" in FY 10 as this has for many years included the Catastrophic Illness Program (CIP) of Special Medical Services. In FY10 budgeting the CIP was moved to the Bureau of Elderly and Adult Services.

- DW/LC

3. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership

**Field Name:** AllOthersExpended

**Row Name:** All Others

**Column Name:** Expended

**Year:** 2009

**Field Note:**

Difference between FY 2009 Budget & Expended is primarily due to State budget reductions, reorganization and ongoing cost saving measures.

4. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership

**Field Name:** AdminExpended

**Row Name:** Administration

**Column Name:** Expended

**Year:** 2009

**Field Note:**

Contributing to the difference between FY 2009 budget vs expended were allocated costs being less than projected, as well as ongoing cost saving measures, state budget reductions, hiring freeze, etc.

5. **Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership

**Field Name:** AdminExpended

**Row Name:** Administration

**Column Name:** Expended

**Year:** 2008

**Field Note:**

Budget vs expended differs by more than 10% as a result of:

Significant reductions in operating expenses, travel, etc.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: NH**

TYPE OF SERVICE	FY 2006		FY 2007		FY 2008	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 3,219,743	\$ 3,027,370	\$ 3,479,207	\$ 3,443,619	\$ 3,808,785	\$ 3,599,303
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 2,316,014	\$ 2,058,596	\$ 2,507,944	\$ 1,676,989	\$ 2,275,996	\$ 2,069,721
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 449,342	\$ 498,602	\$ 463,995	\$ 877,096	\$ 897,243	\$ 935,910
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,499,792	\$ 2,254,807	\$ 2,491,152	\$ 2,780,507	\$ 2,710,687	\$ 2,658,265
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 8,484,891	\$ 7,839,375	\$ 8,942,298	\$ 8,778,211	\$ 9,692,711	\$ 9,263,199

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: NH**

TYPE OF SERVICE	FY 2009		FY 2010		FY 2011	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 4,131,934	\$ 3,516,045	\$ 3,660,298	\$	\$ 3,533,845	\$
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 2,340,590	\$ 2,044,145	\$ 2,288,433	\$	\$ 2,298,251	\$
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 890,576	\$ 883,804	\$ 851,889	\$	\$ 911,878	\$
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,674,854	\$ 2,624,339	\$ 2,806,120	\$	\$ 3,250,829	\$
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 10,037,954	\$ 9,068,333	\$ 9,606,740	\$ 0	\$ 9,994,803	\$ 0

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

1. **Section Number:** Form5\_Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2009  
**Field Note:**  
Contributing to the difference between FY 2009 budget vs expended were Newborn Screening (non State or Federal dollars) funds that were budgeted at \$870,000, but expenditures were \$684,495, a difference of \$185,505. Add'l factors were State budget reductions, reorganization and other cost saving measure.
2. **Section Number:** Form5\_Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2009  
**Field Note:**  
Difference between FY 2009 Budget & Expended is primarily due to State budget reductions, reorganization and cost saving measures.

**FORM 6**

**NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED**

*Sect. 506(a)(2)(B)(iii)*

**STATE: NH**

**Total Births by Occurrence:** 13,389

**Reporting Year: 2009**

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	13,347	99.7	12	0	0	
Congenital Hypothyroidism	13,347	99.7	120	11	11	100
Galactosemia	13,347	99.7	5	0	0	
Sickle Cell Disease	13,347	99.7	3	3	3	100
<b>Other Screening (Specify)</b>						
Biotinidase Deficiency	13,347	99.7	2	1	1	100
Congenital Toxoplasmosis	13,347	99.7	0	0	0	
Cystic Fibrosis	13,347	99.7	45	10	10	100
Homocystinuria	13,347	99.7	62	0	0	
Maple Syrup Urine Disease	13,347	99.7	20	0	0	
Very Long-Chain Acyl-CoA Dehydrogenase Deficiency	13,347	99.7	0	0	0	
Argininosuccinic Acidemia	13,347	99.7	1	0	0	
Citrullinemia	13,347	99.7	1	1	1	100
Isovaleric Acidemia	13,347	99.7	0	0	0	
Propionic Acidemia	13,347	99.7	4	0	0	
Carnitine Uptake Defect	13,347	99.7	2	0	0	
Methylmalonic acidemia (Cbl A,B)	13,347	99.7	4	0	0	
Multiple Carboxylase Deficiency	13,347	99.7	7	0	0	
Trifunctional Protein Deficiency	13,347	99.7	0	0	0	
Glutaric Acidemia Type I	13,347	99.7	1	0	0	
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	13,347	99.7	79	1	1	100
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	13,347	99.7	2	0	0	
Long-Chain L-3-Hydroxy Acyl-CoA Dehydrogenase Deficiency	13,347	99.7	0	0	0	
3-Hydroxy 3-Methyl Glutaric Aciduria	13,347	99.7	3	0	0	
Methylmalonic Acidemia (Mutase Deficiency)	13,347	99.7	4	0	0	
Argininemia (Arg)	13,347	99.7	0	0	0	
Carnitine Palmitoyltransferase II Deficiency (CPTII)	13,347	99.7	0	0	0	

HHH	13,347	99.7	0	0	0	
Multiple Acyle-CoA Dehydrogenase Deficiency (GA2)	13,347	99.7	2	0	0	
Screening Programs for Older Children & Women (Specify Tests by name)						
(1) Use occurrent births as denominator.						
(2) Report only those from resident births.						
(3) Use number of confirmed cases as denominator.						

## FORM NOTES FOR FORM 6

None

### FIELD LEVEL NOTES

1. **Section Number:** Form6\_Main  
**Field Name:** SickCellDisease\_OneScreenNo  
**Row Name:** SickCellDisease  
**Column Name:** Receiving at least one screen  
**Year:** 2011  
**Field Note:**  
There were 3 presumptive cases that were confirmed and treated.
2. **Section Number:** Form6\_Main  
**Field Name:** SickCellDisease\_Confirmed  
**Row Name:** SickCellDisease  
**Column Name:** Confirmed Cases  
**Year:** 2011  
**Field Note:**  
There were 3 presumptive cases that were confirmed and treated.

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: NH**

Reporting Year: 2009

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	1,758	64.4	1.0	15.0	19.5	0.0
Infants < 1 year old	13,684	28.3	0.0	60.3	1.9	9.4
Children 1 to 22 years old	37,604	20.0	0.0	51.0	29.0	0.0
Children with Special Healthcare Needs	2,551	45.5	2.2	46.8	4.7	0.9
Others	71,453	20.0	0.0	51.0	29.0	0.0
<b>TOTAL</b>	<b>127,050</b>					



<b>FORM NOTES FOR FORM 7</b>
None
<b>FIELD LEVEL NOTES</b>
None

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: NH**

Reporting Year: 2009

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	13,684	12,259	204	18	476	10	123	594
Title V Served	1,758	1,053	68	2	31	1	17	586
Eligible for Title XIX	3,872	3,438	98	12	49	2	48	225
<b>INFANTS</b>								
Total Infants in State	13,684	12,259	204	18	476	10	123	594
Title V Served	1,758	1,053	68	2	31	1	17	586
Eligible for Title XIX	3,872	3,438	98	12	49	2	48	225

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	11,730	542	1,412	134	8	147	0	253
Title V Served	1,183	189	386					189
Eligible for Title XIX	3,319	153	400					153
<b>INFANTS</b>								
Total Infants in State	11,730	542	1,412	134	8	147	0	253
Title V Served	1,183	189	386					189
Eligible for Title XIX	3,319	153	400					153

## FORM NOTES FOR FORM 8

None

### FIELD LEVEL NOTES

1. **Section Number:** Form8\_I. Unduplicated Count By Race

**Field Name:** DeliveriesTitleV\_All

**Row Name:** Title V Served

**Column Name:** Total All Races

**Year:** 2011

**Field Note:**

The NH MCH Section has a new prenatal data system, and one reporting agency is having difficulty uploading data. For this reason, about 15% of the data is estimated. This estimation is based on results for the remaining known 85% of the data, and is believed to be quite valid.

2. **Section Number:** Form8\_I. Unduplicated Count By Race

**Field Name:** InfantsTitleV\_All

**Row Name:** Title V Served

**Column Name:** Total All Races

**Year:** 2011

**Field Note:**

The NH MCH Section has a new prenatal data system, and one reporting agency is having difficulty uploading data. For this reason, about 15% of the data is estimated. This estimation is based on results for the remaining known 85% of the data, and is believed to be quite valid.

3. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleV\_TotalNotHispanic

**Row Name:** Title V Served

**Column Name:** Total Not Hispanic or Latino

**Year:** 2011

**Field Note:**

The NH MCH Section has a new prenatal data system, and one reporting agency is having difficulty uploading data. For this reason, about 15% of the data is estimated. This estimation is based on results for the remaining known 85% of the data, and is believed to be quite valid.

4. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_TotalNotHispanic

**Row Name:** Title V Served

**Column Name:** Total Not Hispanic or Latino

**Year:** 2011

**Field Note:**

The NH MCH Section has a new prenatal data system, and one reporting agency is having difficulty uploading data. For this reason, about 15% of the data is estimated. This estimation is based on results for the remaining known 85% of the data, and is believed to be quite valid.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: NH**

	<b>FY 2011</b>	<b>FY 2010</b>	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>
1. State MCH Toll-Free "Hotline" Telephone Number	<u>(800)852-3345 Ext. 4488</u>	<u>(800)852-3345 Ext. 4488</u>	<u>(800)852-3345 Ext.4488</u>	<u>(800)852-3345 Ext. 4488</u>	<u>(800)852-3345 Ext.4488</u>
2. State MCH Toll-Free "Hotline" Name	CSHCN Toll-Free Information Line	CSHCN Toll-Free Information Line	CSHCN Toll-Free Information Line	CSHCN Toll-Free Information Line	CSHCN Toll-Free Information Line
3. Name of Contact Person for State MCH "Hotline"	<u>Margaret Bernard</u>	<u>Margaret Bernard</u>	<u>Virginia Smith</u>	<u>Virginia Smith</u>	<u>Virginia Smith</u>
4. Contact Person's Telephone Number	<u>(603)271-4488</u>	<u>(603)271-4488</u>	<u>(603)271-4488</u>	<u>(603)271-4488</u>	<u>(603) 271-4488</u>
5. Contact Person's Email	<u>mbernard@dhhs.state.nh</u>	<u>mbernard@dhhs.state.nh</u>	<u></u>	<u></u>	<u></u>
6. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>1,286</u>	<u>1,924</u>	<u>1,617</u>

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: NH**

	<b>FY 2011</b>	<b>FY 2010</b>	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 852-3345	(800) 852-3345	(800)852-3345	(800) 852-3345	(800) 852-3345
2. State MCH Toll-Free "Hotline" Name	DHHS Toll-Free Information Line	DHHS Toll-Free Information Line	DHHS Toll-Free Information Line	DHHS Toll-Free Information Line	DHHS Toll-Free Information Line
3. Name of Contact Person for State MCH "Hotline"	Joanie Foss	Joanie Foss	Joanie Foss	Joanie Foss	Joanie Foss
4. Contact Person's Telephone Number	603-271-4537	603-271-4537	603-271-4537	(603) 271-4537	(603) 271-4537
5. Contact Person's Email	jfoss@dhhs.state.nh.us				
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	5,500	5,000	4,500

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

None

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2011**  
*[SEC. 506(A)(1)]*  
**STATE: NH**

1. State MCH Administration:  
(max 2500 characters)

The Title V program is located in the NH Department of Health and Human Services. The Title V program is divided between the Maternal and Child Health Section (MCH) located within the Division of Public Health Services and the Special Medical Services Unit (SMS) located within the Division of Community Based Services. Guided by a Memorandum of Understanding, Administration of the Block Grant is assigned jointly to MCH for services to women, infants and children, and to SMS for children and youth with special health care needs. Together both components of the Title V program provide direct, enabling, population based, and infrastructure building services in the following areas: maternal and child health; children with special health care needs; family planning; childhood lead poisoning prevention; adolescent health; home visiting; health and safety in child care; injury prevention; early hearing detection and intervention; and newborn screening.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 2,002,759
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 7,122,044
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 870,000
7. Program Income (Line 6, Form 2)	\$ 0
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 9,994,803</b>

9. Most significant providers receiving MCH funds:

University of Massachusetts Newborn Screening Lab
Trustees of Dartmouth College
New Hampshire's Community Health Centers

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	1,758
b. Infants < 1 year old	13,684
c. Children 1 to 22 years old	37,604
d. CSHCN	2,551
e. Others	71,453

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Through contracts with community agencies, MCH's, Prenatal, Family Planning, Child Health and Home Visiting Programs provide direct care and enabling services to women, families and children. Home Visiting New Hampshire provides education and support to pregnant women on Medicaid throughout their pregnancy and up to the infant's first birthday. Home visits are made by nurses, social workers, and paraprofessionals. Special emphasis is placed on smoking cessation, decreasing subsequent pregnancies, and maternal depression. Special Medical Services supports statewide systems for Neuromotor Specialty Clinics and Child Development Specialty Clinics. SMS supports a network of nutrition, feeding & swallowing assessment/treatment services and psychology/psychiatry consultation. Special Medical Services collaborates with 12 area agencies serving families with children in ESS and with developmental disabilities. SMS maintains a statewide system that provides community-based care coordination, as well as administering the Partners in Health program, a project providing family support and community integration in 11 communities serving families of children with chronic conditions.

b. Population-Based Services:  
(max 2500 characters)

MCH prenatal outreach is ongoing. MCH and the WIC Program have collaborated to promote TEXT4Baby, an innovative mobile phone based health promotion program for pregnant and parenting women. NH SIDS program materials are distributed at conferences, trainings, and health fairs. Child health personnel promote breastfeeding in SIDS risk reduction outreach efforts. MCH and SMS have jointly worked on workgroups of the new Autism Council and are coordinating efforts as part of a statewide Autism Plan. The Injury Prevention Program (IPP) provides information to the public and media on prevention of motor vehicle crash injuries and child passenger safety. MCH staff are active participants in promoting and utilizing the State Suicide Prevention Plan; participating on the NH Youth Suicide Prevention Advisory Assembly; and supporting community-based post-ventions after a visible suicide in a community. The IPP supports domestic and sexual violence centers to facilitate programs on sexual and intimate partner violence. The Newborn Screening Program continues to provide education and technical assistance for hospitals and healthcare providers throughout the state to assure that every newborn is screened and receives appropriate follow-up, when indicated. The EHDI program assists hospitals to establish screening programs, through the provision of hospital guidelines, education, and technical assistance. A data tracking system is operational. Special Medical Services provides nutrition outreach education activities for children with diabetes and cystic fibrosis.

c. Infrastructure Building Services:  
(max 2500 characters)

One of the most significant efforts of NH's Title V program is the support of a network of 13 community health centers throughout the state. Title V funds enable the community health centers to develop innovative plans and new relationships for integrating oral health and primary care as well as mental health care and primary care. Title V funds are often the "glue" that enable health centers to do outreach, build systems, and meet the unique needs of vulnerable populations that are not covered by fees for service for direct care. The NH SSDI project is leading efforts to provide increased data capacity for MCH. Projects include data linkages in the EHDI program, Newborn Screening Program and a web based prenatal data collection and linkage process. The Early Childhood Comprehensive Systems (ECCS) project has developed with partners throughout the state the ECCS Implementation Plan that focuses on infrastructure building across domains for unified early childhood services. As part of ECCS, Healthy Child Care New Hampshire trains and supports health consultants to work with child care programs to improve health and safety in childcare. MCH collaborates with SCHIP program to improve outreach and enrollment of children in Healthy Kids. MCH and SMS, in partnership, financially supports continued planning of communities in response to infant mental health concerns. SMS participates as a state advisory representative on the Bureau of Behavioral Health's Mental Health Planning Advisory Council. SMS provides contracted support for the

activities of the Center for Medical Home Improvement (Crotched Mountain). Through the activities of the Health Care Transition Project, consultation is offered to pediatric practices needing assistance with planning for youth and young adults. SMS works with the New Hampshire Pediatric Society and other collaborators to provide education and develop health transition services and this year has provided Open Forums on Universal Developmental Screening.

12. The primary Title V Program contact person:

Name	Patricia Tilley
Title	MCH Administrator/ Title V Director
Address	29 Hazen Drive
City	Concord
State	NH
Zip	03301
Phone	603-271-4526
Fax	603-271-4519
Email	PTILLEY@DHHS.STATE.NH.US
Web	<a href="http://www.dhhs.state.nh.us/DHHS/MCH/default.htm">http://www.dhhs.state.nh.us/DHHS/MCH/default.htm</a>

13. The children with special health care needs (CSHCN) contact person:

Name	Elizabeth Collins
Title	SMS Administrator/ Title V CSHCN Director
Address	129 Pleasant Street
City	Concord
State	NH
Zip	03301
Phone	(603)271-8181
Fax	(603) 271-4902
Email	ecollins@dhhs.state.nh.us
Web	<a href="http://www.dhhs.state.nh.us/DHHS/SPECIALMEDSRV/">http://www.dhhs.state.nh.us/DHHS/SPECIALMEDSRV/</a>



**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None

**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: NH**

**Form Level Notes for Form 11**

None

**PERFORMANCE MEASURE # 01**

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	90	95	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	100.0
Numerator	16	14	23	23	27
Denominator	16	14	23	23	27
Data Source				screening records	screening records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Final

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

None

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	54.9	55.9	55.9	61	60
Annual Indicator	54.9	54.9	60	60	60
Numerator					
Denominator					
Data Source				National Survey of CSHCN 2005-2006	National Survey of CSHCN 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	60	60	63	63	63
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**2. Section Number:** Form11\_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**3. Section Number:** Form11\_Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	55.9	56.9	56.9	50	50
Annual Indicator	55.5	55.5	49.6	49.6	49.6
Numerator					
Denominator					
Data Source				National Survey of CSHCN 2005-2006	National Survey of CSHCN 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	50	50	54	54	54
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

**2. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

**3. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	<b>Annual Objective and Performance Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Performance Objective</b>	61.9	62.9	62.9	68	67
<b>Annual Indicator</b>	61.9	61.9	67.3	67.3	67.3
<b>Numerator</b>					
<b>Denominator</b>					
<b>Data Source</b>				National Survey of CSHCN 2005-2006	National Survey of CSHCN 2005-2006
<b>Check this box if you cannot report the numerator because</b> 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Final

	<b>Annual Objective and Performance Data</b>				
	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>
<b>Annual Performance Objective</b>	67	67	70	70	70
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	78.4	79.4	79.4	86	86
Annual Indicator	78.4	78.4	85.8	85.8	85.8
Numerator					
Denominator					
Data Source				National Survey of CSHCN 2005-2006	National Survey of CSHCN 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	86	86	89	89	89
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

**2. Section Number:** Form11\_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

**3. Section Number:** Form11\_Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.8	5.9	5.9	52	52
Annual Indicator	5.8	5.8	51.6	51.6	51.6
Numerator					
Denominator					
Data Source				National Survey of CSHCN 2005-2006	National Survey of CSHCN 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2010	2011	2012	2013	2014
Annual Performance Objective	52	52	55	55	55
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2009**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

**2. Section Number:** Form11\_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2008**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

**3. Section Number:** Form11\_Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	80	87	87	82	85
Annual Indicator	86.3	82.5	76.3	84.6	81.0
Numerator	12,990	12,418	10,860	12,041	11,528
Denominator	15,052	15,052	14,233	14,233	14,233
Data Source				CDC Survey	CDC Survey
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	85	86	87	88	89
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2009**Field Note:**

The numerator was obtained by using the most recent CDC National Immunization Survey rate for NH (Qtr 1/2009-Qtr 4/2009) - available from the NH Immunization Program for 4:3:1:3:3:1 - and applying it to the denominator. The denominator is two year olds in NH in 2007, from the US Bureau of the Census Estimates Branch.

**2. Section Number:** Form11\_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2008**Field Note:**

The numerator was obtained by using the most recent CDC National Immunization Survey rate for NH (Qtr 3/2007-Qtr 2/2008), available from the NH Immunization Program, and applying it to the denominator. The denominator is two year olds in NH in 2007, from the US Bureau of the Census Estimates Branch.

**3. Section Number:** Form11\_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2007**Field Note:**

The numerator was obtained by using the most recent CDC National Immunization Survey rate for NH (revised February, 2008 estimates), available from the NH Immunization Program, and applying it to the denominator. The denominator is two year olds in NH in 2007, from the US Bureau of the Census Estimates Branch.

2007 data was corrected in the spring of 2009.



**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	10	6.9	6.9	7.3	7.2
Annual Indicator	6.9	7.2	7.4	7.7	7.7
Numerator	195	205	203	212	212
Denominator	28,128	28,653	27,473	27,473	27,473

**Data Source**

Birth data

Birth data

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	7.5	7.4	7.3	7.2	7.1
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #8

**Field Name:** PM08

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data is unavailable. 2008 data is used as an estimate.

**2. Section Number:** Form11\_Performance Measure #8

**Field Name:** PM08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Birth data is resident occurrent births only, i.e. out-of-state data is not available.

**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	42.4	42.4	42.4	42.4	44
Annual Indicator	42.4	42.4	42.4	42.4	54.5
Numerator	249	249	249	249	1,644
Denominator	587	587	587	587	3,015
Data Source				2006 3rd grade survey	2009 3rd grade survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	54.5	54.5	54.5	54.5	60
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2009**Field Note:**

Statewide oral health data for NPM #9 and SPM #4 is generally collected every five years through the Oral Health Survey of Third Grade Children. The data for 2009 is new.

Please note: statewide prevalence estimates are weighted to represent NH third grade students, and to account for selection probability and non-response. Using the weighting, the result for this measure is 60.4%, not 54.5.

**2. Section Number:** Form11\_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2008**Field Note:**

Statewide oral health data for NPM #9 and SPM #4 is generally collected every five years through the Oral Health Survey of Third Grade Children. The next data from the survey will not be available until the fall of 2009.

**3. Section Number:** Form11\_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

Statewide oral health data for NPM #9 and SPM #4 is generally collected every five years through the Oral Health Survey of Third Grade Children. The next data from the survey will not be available until the spring of 2010.

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
<b>Annual Performance Objective</b>	36	60	60	80	0
<b>Annual Indicator</b>	0		1.2	1	1
<b>Numerator</b>			3		
<b>Denominator</b>			241,716		
<b>Data Source</b>				Vital Records	Vital Records
<b>Check this box if you cannot report the numerator because</b>					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.			Yes	Yes	Yes
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
<b>Annual Performance Objective</b>	0	0	0	0	0
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

Calendar year 2009 is unavailable. At the annual federal review in August of 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. The small numbers box is used when "there are fewer than 5 events and when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**2. Section Number:** Form11\_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

Calendar year 2008 vital records death data is provisional, due to the fact that out-of-state data is incomplete.

At the annual federal review in Boston in August of 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Therefore, we have removed the 2008 Standard Ratio result from the indicator and have "checked" the small numbers box. Note: the small numbers box is used when "there are fewer than 5 events AND when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**3. Section Number:** Form11\_Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

US data source: [http://webappa.cdc.gov/sasweb/ncipc/mortrate10\\_sy.html](http://webappa.cdc.gov/sasweb/ncipc/mortrate10_sy.html)

At the annual federal review in Boston in August of 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events AND when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**PERFORMANCE MEASURE # 11**

The percent of mothers who breastfeed their infants at 6 months of age.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective		45	45	50	49
Annual Indicator	45.9	43.8	48.7	46.8	55.1
Numerator					
Denominator					
Data Source				CDC report card	CDC report card
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	56	57	58	59	60
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data is from the CDC Breast Feeding Report Card, 2009: Outcome Indicators ([www.cdc.gov](http://www.cdc.gov)). A numerator and denominator are not available.

2. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is from the CDC Breast Feeding Report Card, 2008: Outcome Indicators ([www.cdc.gov](http://www.cdc.gov)). A numerator and denominator are not available.

3. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is from the CDC Breast Feeding Report Card, 2007: Outcome Indicators ([www.cdc.gov](http://www.cdc.gov)). A numerator and denominator are not available.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	96	97	98	99	98
Annual Indicator	96.1	97.2	98.2	97.4	97.3
Numerator	13,422	13,673	13,683	13,279	12,968
Denominator	13,968	14,069	13,937	13,629	13,327
Data Source				screening records	screening records
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	98	99	99.5	99.5	99.5
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2009**Field Note:**

Numerator is actual number of infants screened. Denominator is number of occurrent births.

**2. Section Number:** Form11\_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2008**Field Note:**

Numerator is actual number of infants screened. Denominator is number of occurrent births.

**3. Section Number:** Form11\_Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator is actual number of infants screened. Denominator is number of occurrent births.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	6.5	5.5	5.5	5.5	4
Annual Indicator	6.0	6.0	6.0	4.3	4.3
Numerator	18,667	19,402	19,402	12,921	12,921
Denominator	311,117	323,309	323,309	298,439	298,439
Data Source				2007 Nat'l Survey of Children's Health	2007 Nat'l Survey
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	4	4	4	4	4
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data is from the 2007 National Survey of Children's Health, a project of the Child and Adolescent Health Measurement Initiative.

There are multiple sources for the uninsured population - with discrepant results. For example, the Kaiser Family Foundation Website (statehealthfacts.org) shows 5.1% uninsured children in NH. Their uninsured estimates are based on the Census Bureau's March 2007 and 2008 Current Population Survey (CPS: Annual Social and Economic Supplements).

We have chosen to use the number from a national survey instead of census estimates.

**2. Section Number:** Form11\_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data is taken from the 2007 National Survey of Children's Health, a project of the Child and Adolescent Health Measurement Initiative.

**3. Section Number:** Form11\_Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data was obtained from the March, 2007 report, "Whose Kids are Covered, A State-by-State Look at Uninsured Children" prepared for the Robert Wood Johnson Foundation. The data comes from page 4, table 3 of the report, "Number and Percent of Children (0-18) With and Without Health Insurance Coverage in the United States, by State: Three-Year Average 2003-2005". According to the "Kids Count New Hampshire Data Book, 2008", the uninsured rate continues to be 6% (data obtained from Census estimates). Kids Count New Hampshire is based at the Children's Alliance of NH.

The Kaiser Family Foundation Website (statehealthfacts.org) show 7% for NH. Their uninsured estimates are based on the Census Bureau's March 2006 and 2007 Current Population Survey (CPS: Annual Social and Economic Supplements).

The Behavioral Risk Factor Surveillance Survey conducted in NH in 2005-2006 may be releasing information they have gathered in the near future, regarding the percentage of children uninsured in NH. When this data is released, it will be reviewed to see how it compares with the census estimates.

**PERFORMANCE MEASURE # 14**

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008
Annual Performance Objective		35	35	33
Annual Indicator	35.0	34.0	33.6	32.5
Numerator	2,274	2,381	2,437	2,691
Denominator	6,496	7,003	7,254	8,286
Data Source				NH WIC program
Check this box if you cannot report the numerator because				
1. There are fewer than 5 events over the last year, and				
2. The average number of events over the last 3 years is fewer				
than 5 and therefore a 3-year moving average cannot be				
applied.				
(Explain data in a year note. See Guidance, Appendix IX.)				
Is the Data Provisional or Final?				Final

<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013
Annual Performance Objective	31	30	29	28
Annual Indicator				
Numerator				
Denominator				

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data is from Lisa Richards, NH WIC program, from CDC Pediatric Nutrition Surveillance System.

**2. Section Number:** Form11\_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data is from Lisa Richards, NH WIC program, from CDC Pediatric Nutrition Surveillance System.

**3. Section Number:** Form11\_Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data is from Lisa Richards, NH WIC program, from CDC Pediatric Nutrition Surveillance System.

**PERFORMANCE MEASURE # 15**

Percentage of women who smoke in the last three months of pregnancy.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	<u>12</u>	<u>12</u>	<u>12</u>	<u>13</u>	<u>12</u>
Annual Indicator	<u>12.3</u>	<u>12.7</u>	<u>13.3</u>	<u>12.0</u>	<u>12.0</u>
Numerator	<u>1,511</u>	<u>1,599</u>	<u>1,681</u>	<u>1,627</u>	<u>1,627</u>
Denominator	<u>12,246</u>	<u>12,605</u>	<u>12,621</u>	<u>13,606</u>	<u>13,606</u>

**Data Source**

Birth Certificate

Birth Certificate

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)***Is the Data Provisional or Final?**

Final

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	<u>11.5</u>	<u>11</u>	<u>10.5</u>	<u>10</u>	<u>9.5</u>
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data is not available. 2008 data is used as an estimate.

**2. Section Number:** Form11\_Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data does not include out-of-state births, as they are not available.



**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	138	130	102	30	0
Annual Indicator	63.7		5.1	3	3
Numerator			5		
Denominator			98,207		
Data Source				Vital Records	Vital Records
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer			Yes	Yes	Yes
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	2	2	1	1	0
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

At the annual federal review in Boston in August of 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events and when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**2. Section Number:** Form11\_Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

At the annual federal review in Boston in August of 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events AND when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**3. Section Number:** Form11\_Performance Measure #16

**Field Name:** PM16

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

At the annual federal review in Boston in August of 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events AND when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	80	80	86	79	89
Annual Indicator	78.7	85.3	78.0	87.5	87.5
Numerator	107	110	92	91	91
Denominator	136	129	118	104	104

**Data Source**

Birth Certificate

Birth Certificate

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	90	91	92	93	94
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data is unavailable. Data from 2008 is used as an estimate.

**2. Section Number:** Form11\_Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data is for resident occurrent births. Out-of-state data is not available for 2007.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	90	85	82	83	84
Annual Indicator	83.4	81.5	82.0	82.7	82.7
Numerator	9,251	8,980	9,233	8,960	8,960
Denominator	11,095	11,015	11,263	10,837	10,837
Data Source				Birth Certificate	Birth Certificate

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	84	85	86	87	88
Annual Indicator					
Numerator					
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data is unavailable. Data from 2008 is used as an estimate.

2. **Section Number:** Form11\_Performance Measure #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Birth records that did not have information for this measure were not included in the denominator.

Data is not comparable to years prior to 2005, due to the fact that the month prenatal care began is no longer explicitly collected after 2004. Instead, we collect the date of the first prenatal care visit and calculate the month of pregnancy in which prenatal care began, by subtracting the date of the last menses.

3. **Section Number:** Form11\_Performance Measure #18

**Field Name:** PM18

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

1425 birth records did not have information for this measure, and were not included in the denominator.

Out-of-state birth data is not available.

Data is not comparable to years prior to 2005, due to the fact that the month prenatal care began is no longer explicitly collected after 2004. Instead, we collect the date of the first prenatal care visit and calculate the month of pregnancy in which prenatal care began, by subtracting the date of the last menses.



**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: NH**

**Form Level Notes for Form 11**

None

**STATE PERFORMANCE MEASURE # 1 - REPORTING YEAR**

Percent of data linkage projects completed

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		40	60	80	100
Annual Indicator		60.0	80.0	80.0	80.0
Numerator		3	4	4	4
Denominator		5	5	5	5
Data Source				MCH Data Team	MCH Data Team
Is the Data Provisional or Final?				Final	Final

  

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	100	100	100	100	
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

**Field Level Notes**

**1. Section Number:** Form11\_State Performance Measure #1

**Field Name:** SM1

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The Medicaid program has recently issued a contract to do linkage with the birth certificate.

**2. Section Number:** Form11\_State Performance Measure #1

**Field Name:** SM1

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

The infant birth, and Maternal and Child Health Section prenatal care link was achieved in CY 2007.

**STATE PERFORMANCE MEASURE # 3 - REPORTING YEAR**

Percent of children age two (24-35 months) on Medicaid who have been tested for lead.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
<b>Annual Performance Objective</b>	<u>27</u>	<u>27</u>	<u>28</u>	<u>34</u>	<u>35</u>
<b>Annual Indicator</b>	<u>31.7</u>	<u>27.4</u>	<u>33.8</u>	<u>32.6</u>	<u>42.2</u>
<b>Numerator</b>	<u>1,507</u>	<u>1,316</u>	<u>1,618</u>	<u>1,646</u>	<u>1,473</u>
<b>Denominator</b>	<u>4,751</u>	<u>4,801</u>	<u>4,780</u>	<u>5,042</u>	<u>3,489</u>
<b>Data Source</b>				Child Lead Prog.	Child Lead Prog.
<b>Is the Data Provisional or Final?</b>				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
<b>Annual Performance Objective</b>	<u>36</u>	<u>37</u>	<u>38</u>	<u>39</u>	
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2009**Field Note:**

Calendar year 2009 data from Paul Lakevicius, Childhood Lead Prevention Program.

**2. Section Number:** Form11\_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2008**Field Note:**

Calendar year 2008 data from Megan Tehan, Childhood Lead Prevention Program.

**3. Section Number:** Form11\_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2007**Field Note:**

Calendar year 2007 data from Megan Tehan, CLPPP.

**STATE PERFORMANCE MEASURE # 4 - REPORTING YEAR**

Percent of third grade children screened who had untreated dental decay.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
<b>Annual Performance Objective</b>	<u>24.2</u>	<u>22</u>	<u>24</u>	<u>24.2</u>	<u>22</u>
<b>Annual Indicator</b>	<u>24.2</u>	<u>24.2</u>	<u>24.2</u>	<u>24.2</u>	<u>14.7</u>
<b>Numerator</b>	<u>142</u>	<u>142</u>	<u>142</u>	<u>142</u>	<u>443</u>
<b>Denominator</b>	<u>587</u>	<u>587</u>	<u>587</u>	<u>587</u>	<u>3,015</u>
<b>Data Source</b>				3rd grade survey	3rd Grade Survey
<b>Is the Data Provisional or Final?</b>				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
<b>Annual Performance Objective</b>	<u>22</u>	<u>22</u>	<u>22</u>	<u>22</u>	
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2009**Field Note:**

Statewide oral health data for NPM #9 and SPM #4 is generally collected every five years through the Oral Health Survey of Third Grade Children. The data for 2009 is new.

Please note: statewide prevalence estimates are weighted to represent NH third grade students, and to account for selection probability and non-response. Using the weighting, the result for this measure is 12%, not 14.7.

**2. Section Number:** Form11\_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2008**Field Note:**

Statewide oral health data for NPM #9 and SPM #4 is generally collected every five years through the Oral Health Survey of Third Grade Children. The next data from the survey will not be available until the fall of 2009.

**3. Section Number:** Form11\_State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2007**Field Note:**

Statewide oral health data for NPM #9 and SPM #4 is generally collected every five years through the Oral Health Survey of Third Grade Children. The next data from the survey will not be available until the spring of 2010.

**STATE PERFORMANCE MEASURE # 5 - REPORTING YEAR**

The rate (per 100,000) of emergency department visits among youths aged 15-19 resulting from being an occupant in a motor vehicle crash

	<b>Annual Objective and Performance Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Performance Objective</b>	2,500	2,300	2,300	2,200	2,100
<b>Annual Indicator</b>	2,207.6	1,807.3	1,609.9	1,276.4	1,952.7
<b>Numerator</b>	2,114	1,753	1,581	1,269	1,894
<b>Denominator</b>	95,761	96,995	98,207	99,421	96,995
<b>Data Source</b>				Vital Records	Vital Records
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

	<b>Annual Objective and Performance Data</b>				
	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>
<b>Annual Performance Objective</b>	2,000	1,900	1,800	1,700	
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2009**Field Note:**

2009 data is not available, and 2007 and 2008 data is provisional. Therefore, the \*final\* data from 2006 is used.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**2. Section Number:** Form11\_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2008**Field Note:**

2007 and 2008 data is missing NH residents who received treatment out of state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**3. Section Number:** Form11\_State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 and 2008 data is missing NH residents who received treatment out of state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.



**STATE PERFORMANCE MEASURE # 6 - REPORTING YEAR**

Percent of adolescents (ages 10-20) eligible for an EPSDT service who received an EPSDT service during the past year

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
<b>Annual Performance Objective</b>	<u>35</u>	<u>40</u>	<u>42</u>	<u>45</u>	<u>46</u>
<b>Annual Indicator</b>	<u>41.5</u>	<u>41.4</u>	<u>43.5</u>	<u>45.2</u>	<u>53.2</u>
<b>Numerator</b>	<u>12,127</u>	<u>12,976</u>	<u>13,739</u>	<u>14,495</u>	<u>18,459</u>
<b>Denominator</b>	<u>29,205</u>	<u>31,352</u>	<u>31,579</u>	<u>32,069</u>	<u>34,729</u>
<b>Data Source</b>				416 EPSDT report	416 EPDST report
<b>Is the Data Provisional or Final?</b>				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
<b>Annual Performance Objective</b>	<u>47</u>	<u>48</u>	<u>49</u>	<u>50</u>	
<b>Annual Indicator</b>	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
<b>Numerator</b>					
<b>Denominator</b>					

**Field Level Notes**

- Section Number:** Form11\_State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 From FY2009 416 report via Maria Pliakos (ext 7194) and Jackie Leone.
- Section Number:** Form11\_State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 From FY2008 416 report via Maria Pliakos (ext 7194) and Jackie Leone.
- Section Number:** Form11\_State Performance Measure #6  
**Field Name:** SM6  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 From FY2007 416 report via Maria Pliakos (ext 7194) and Jackie Leone.

**STATE PERFORMANCE MEASURE # 7 - REPORTING YEAR**

Percent of center-based child care facilities in the MCH catchment area and serving children under age 2, that are visited at least once a month by a child care health consultant

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective		5	5	4	16
Annual Indicator		0.0	1.8	14.3	
Numerator		0	1	5	
Denominator		43	55	35	
Data Source				Survey	
Is the Data Provisional or Final?				Provisional	

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>20</u>	<u>25</u>	<u>35</u>	<u>40</u>	<u></u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2009**Field Note:**

This data has been collected in the past through a survey. Due to funding issues and decreased personnel, we were unable to do the survey for 2009.

**2. Section Number:** Form11\_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2008**Field Note:**

This year's catchment area was more limited in size than the previous year, thus the decrease in the number of facilities surveyed. Despite this decrease, the number of on-site visits to child care facilities by a child care health consultant increased.

**3. Section Number:** Form11\_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2007**Field Note:**

Although most centers did not have a monthly on-site visit by a child care health consultant, many child care centers did have at least one on-site visit in the year 2007.

Number of centers surveyed: 55

Number of on-site visits by a child care health consultant to centers: 67

Number of children in attendance at the centers on an average day: 813

The survey was conducted by telephone. In addition to the collection of more accurate data by phone, this had the advantage of personalized marketing of the child care health consultation network. Follow-up thank you letters will be sent to the providers, with specific health and safety information that they requested during the survey; they will also be sent contact information for their child health care health consultant.

**STATE PERFORMANCE MEASURE # 9 - REPORTING YEAR**

[REVISED]:The percent of CSHCN who are at risk for/are overweight or obese

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		25	25	8	8
Annual Indicator					
Numerator		14	13	25	14
Denominator		164	143	243	243
Data Source				SMS clinic reports	SMS clinic reports
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>8</u>	<u>8</u>	<u>8</u>	<u>8</u>	<u></u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2009**Field Note:**

This reflects those children with a BMI of 96% or greater. If the population of children with a BMI of 85-95% (identified by the CDC as "at risk for overweight") is included, the percentage more than doubles from 6.17% to 16.30%. The numbers represent solely a select population of children who are being served by the Neuromotor Clinic Program.

**2. Section Number:** Form11\_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2008**Field Note:**

This reflects those children with a BMI of 95% or greater. If the population of children with a BMI of 85-95% (identified by the CDC as "at risk for overweight") is included, the percentage more than doubles from 10.29% to 17.70%. The numbers represent solely a select population of children who are being served by the Neuromotor Clinic Program.

**STATE PERFORMANCE MEASURE # 10 - REPORTING YEAR**

[REVISED]: The percent of respite/childcare providers, serving medically and behaviorally complex children, who have participated in competence-based training.

Annual Objective and Performance Data					
	2005	2006	2007	2008	2009
Annual Performance Objective		0	20	20	50
Annual Indicator					
Numerator		0	0	7	17
Denominator		1	1	9	124
Data Source				College of Direct Support training records	College of Direct Support training records
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective	<u>50</u>	<u>50</u>	<u>50</u>	<u>50</u>	<u> </u>
Annual Indicator	Future year objectives for state performance measures from needs assessment period 2006-2010 are view-only. If you are continuing any of these measures in the new needs assessment period, you may establish objectives for those measures on Form 11 for the new needs assessment period.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2009**Field Note:**

In response to ongoing development of this measure the detail sheet has been edited to more accurately reflect the goal. For reporting purposes the numbers identified reflect the total number of providers from Crotched Mountain Rehabilitation Center and the Moore Center who have participated in the recommended training (College of Direct Support) and what percentage work with medically and behaviorally complex children.

**2. Section Number:** Form11\_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

In response to ongoing development of this measure the detail sheet has been edited to more accurately reflect the goal. For reporting purposes the numbers identified reflect the total number of providers from Crotched Mountain Rehabilitation Center who have participated in the recommended training (College of Direct Support) and what percentage work with medically and behaviorally complex children.



**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]  
**STATE: NH**

**Form Level Notes for Form 12**

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	4	4	5.5	4	4
Annual Indicator	4.5		5.4	5.4	5.4
Numerator	65		77	77	77
Denominator	14,399		14,136	14,136	14,136
Data Source				Vital Records	Vital Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	5	4.5	4	3.5	3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

**1. Section Number:** Form12\_Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2007 is the most recent period for which NH has final death data that includes out-of-state deaths.

**2. Section Number:** Form12\_Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2007 is the latest period for which NH has final death data that includes out-of-state deaths.

**3. Section Number:** Form12\_Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2007 is the latest period for which NH has final death data that includes out-of-state deaths.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective			1.1	1.1	1.1
Annual Indicator	1.1	1.1	1.0	1.0	1.0
Numerator			1	1	1
Denominator			1	1	1
Data Source				Estimate	Estimate
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer			Yes	Yes	Yes
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	1	1	1	1	1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

The black infant mortality numbers are too small to report or use for this calculation. In fact, many times there are no black infant deaths.

2. **Section Number:** Form12\_Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The black infant mortality numbers are too small to report.

3. **Section Number:** Form12\_Outcome Measure 2

**Field Name:** OM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

The black infant mortality numbers are too small to report.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	4	4	4.5	4.5	4.5
Annual Indicator	4.5	4.5	3.3	3.3	3.3
Numerator			46	46	46
Denominator			14,136	14,136	14,136
Data Source				Vital Records	Vital Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	3	2.8	2.6	2.4	2.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are  
 not required for future year data.

**Field Level Notes****1. Section Number:** Form12\_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2009**Field Note:**

2007 is the most recent year for which data is available.

**2. Section Number:** Form12\_Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

2007 is the most recent year for which data is available.



**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	1.5	1.4	1	1	1
Annual Indicator	1.1	1.1	2.2	2.2	2.2
Numerator			31	31	31
Denominator			14,136	14,136	14,136
Data Source				Vital Records	Vital Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	2	1.9	1.8	1.7	1.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are  
 not required for future year data.

**Field Level Notes****1. Section Number:** Form12\_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2009**Field Note:**

2007 is the most recent year for which data is available.

**2. Section Number:** Form12\_Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2008**Field Note:**

2007 is the most recent year for which data is available.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	7.5	7.5	6.5	6.5	6.5
Annual Indicator	6.5		4.3	4.3	4.3
Numerator			61	61	61
Denominator			14,194	14,194	14,194
Data Source				Vital Records	Vital Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	4	3.8	3.6	3.4	3.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form12\_Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2007 is the most recent year for which data is available.

**2. Section Number:** Form12\_Outcome Measure 5

**Field Name:** OM05

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2007 is the most recent year for which data is available.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

**Annual Objective and Performance Data**

	2005	2006	2007	2008	2009
Annual Performance Objective	17	14	16	31	30
Annual Indicator	33.6	34.6	12.2	14.5	14.5
Numerator	78	80	28	33	33
Denominator	232,436	231,033	229,447	227,546	227,546

**Data Source**

Vital Records

Vital Records

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2010	2011	2012	2013	2014
Annual Performance Objective	14	13.5	13	12.5	12

**Annual Indicator****Numerator****Denominator**

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form12\_Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2007 is the most recent period for which out-of-state death data is available.

**2. Section Number:** Form12\_Outcome Measure 6

**Field Name:** OM06

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2007 is the most recent period for which out-of-state death data is available.



**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
*[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]*  
**STATE: NH**

**Form Level Notes for Form 12**

None

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: NH**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

1

**Total Score:** 14

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

Ratings were calculated solely from direct survey results of the staff of NH Family Voices - This group has remained unchanged.

**FIELD LEVEL NOTES**

1. **Section Number:** Form13\_Main

**Field Name:** Question6

**Row Name:** #6. Family members of diverse cultures are involved in all of the above activities

**Column Name:**

**Year:** 2011

**Field Note:**

SMS has remained committed to funding parent involvement through a contract with NH Family Voices. The funding level has continued to insure the same number of paid consultants, indeed the same consultants, who work to incorporate cultural and linguistic needs into their representation but they themselves are not of diverse cultures.

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: NH FY: 2011**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. To improve access to children's mental health services
2. To decrease pediatric overweight and obesity
3. To decrease the use and abuse of alcohol, tobacco and other substances among youth, pregnant women and families
4. To improve the availability of adequate insurance and access to health care and maintain the infrastructure of safety net providers/services
5. To improve access to standardized developmental screening for young children
6. To decrease unintentional injury, particularly those resulting from falls and motor vehicle crashes, among children and adolescents
7. To reduce exposure to lead hazards, asthma triggers and other environmental hazards to assure safe and healthy home environments
8. To improve oral health and access to dental care
9. To increase family support and access to trained respite and childcare providers
10. To decrease the incidence of preterm birth



**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: NH

APPLICATION YEAR: 2011

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	Technical assistance from federal partners is requested as New Hampshire establishes its first Maternal Mortality Review Panel.	Although CDC has published best practices in Fetal, Infant and Maternal Mortality Review Panels, it would be helpful to have on the ground consultation as NH's programs are established.	AMCHP, CDC and/or other partners.
2.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	Technical assistance from federal partners is requested as New Hampshire establishes its first Infant Mortality Review Panel.	Although CDC has published best practices in Fetal, Infant and Maternal Mortality Review Panels, it would be helpful to have on the ground consultation as NH's programs are established.	AMCHP, CDC and/or other partners.
3.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    5    </u>	Technical assistance to facilitate SMS completion of strategic planning to include the review of care coordination, clinic services, program design, needs assessment, cultural & linguistic competence and public awareness/marketing.	SMS has significantly changed the direction of its services but formal reflection and strategic planning has not taken place. SMS needs to develop a vision and mission statement and a planned approach to meet the needs of CSHCN in NH	Yellow Brick Road Consulting; or other partners as recommended at Strategic planning workshop at Title V partners meeting Fall 2010
4.	<b>Data-related Issues - Needs Assessment</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	Technical assistance to facilitate expert consultation on identifying disparities related to CSHCN in NH	SMS has seen a significant increase the number of diverse populations accessing services. A formal evaluation is needed related to incorporating cultural and linguistic appropriate components into provided services.	NH Minority Health Coalition or National Center for Cultural Competence, Georgetown University
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>            </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>            </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>            </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>            </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>            </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this			

	issue pertains by entering the measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: NH**

SP(Reporting Year) # 1

**PERFORMANCE MEASURE:**

Percent of data linkage projects completed

**STATUS:**

Active

**GOAL**

To link MCH and Vital Records data to improve analytical opportunities.

**DEFINITION**

See numerator and denominator below. Linkages projected for the future are: births and infant deaths, births and prenatal care, births and infant hearing screening, births and newborn metabolic screening, and Medicaid and births with regard to prenatal care.

**Numerator:**

Number of linkage projects completed

**Denominator:**

Total number of linkage projects planned (5)

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Sources are: MCH program data (including data from prenatal program, newborn metabolic screening program, and newborn hearing screening program), as well as medicaid data and vital records data (both births and infant deaths). Access to vital records is particularly difficult at this time, due to the transfer of this department from public health to the Secretary of State's office. We wish to link the following: - births and fetal deaths - prenatal program data and births - early hearing screening data and births - newborn metabolic screening data and births - Medicaid and birth data related to prenatal care

**SIGNIFICANCE**

Linking MCH-related data sets has been shown to expand analytic opportunities and lead to improved information generation. We wish to increase our ability to evaluate programs and identify needs, to decrease the reporting burden on MCH-funded agencies by reducing redundant data collection, and improve data accuracy.

SP(Reporting Year) # 3

**PERFORMANCE MEASURE:**

Percent of children age two (24-35 months) on Medicaid who have been tested for lead.

**STATUS:**

Active

**GOAL**

To reduce the morbidity associated with lead poisoning through early detection.

**DEFINITION**

**Numerator:**

The number of children age two (24-35 months) in the state who are enrolled on Medicaid and have been tested for lead at least once during the year.

**Denominator:**

The number of children age two who are enrolled on Medicaid.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Lead testing figure is from the NH Childhood Lead Poisoning Prevention Program; Medicaid figure is from the NH Medicaid Administration Bureau via the NH Childhood Lead Poisoning Prevention Program.

**SIGNIFICANCE**

Lead poisoning is one of the most common and preventable childhood environmental health problems in the U.S. Studies have shown associations between decreased intelligence, impaired neurobehavioral development, decreased hearing acuity and growth inhibition with lead levels as low as 10-15 micrograms per deciliter. Low-income children, especially those living in the inner city, are at an increased risk for lead poisoning. Ages one and two years are the recommended targeted times for testing at-risk children for lead exposure. In NH, the Childhood Lead Poisoning Prevention Protocols recommend that all one and two year olds enrolled on Medicaid be tested for lead. A recent national study showed that the testing rate of children on Medicaid, especially two year olds, is significantly lower than expected. In NH, the lead testing rates for all two year olds is approximately half the rate for one year olds.

SP(Reporting Year) # 4

**PERFORMANCE MEASURE:**

Percent of third grade children screened who had untreated dental decay.

**STATUS:**

Active

**GOAL**

To reduce the proportion of children with untreated dental decay.

**DEFINITION**

See numerator and denominator below

**Numerator:**

Number of third grade children screened who had untreated dental decay.

**Denominator:**

Number of third grade children screened.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

State wide Third Grade Oral Health Survey. This is a random sample survey of all third grade students in the state, developed by the Association of State and Territorial Dental Directors. This survey will be done every 3 years and the first one was done in 2001.

**SIGNIFICANCE**

As stated in the Surgeon General's report on Oral Health in America, dental decay is the single most common childhood disease. Results of screening 2nd and 3rd graders in 9 school-based programs in NH revealed that 23% of children were suffering from untreated dental decay. Developing programs and policies, in order to reduce the burden of this disease on children, is of prime significance.

PERFORMANCE MEASURE:	The rate (per 100,000) of emergency department visits among youths aged 15-19 resulting from being an occupant in a motor vehicle crash
STATUS:	Active
GOAL	To reduce injuries among adolescents, aged 15-19, associated with being an occupant in a motor vehicle crash.
DEFINITION	see numerator and denominator below <b>Numerator:</b> Number of adolescents age 15-19 seen in an emergency department as a result of injuries associated with being an occupant in a motor vehicle crash. <b>Denominator:</b> Number of adolescents ages 15-19 <b>Units:</b> 100000 <b>Text:</b> Rate
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	NH Bureau of Health Statistics and Data Management
SIGNIFICANCE	Motor vehicle crashes are a leading cause of death and injuries among adolescents. Previously we had a state measure (#3, now inactive) which addressed fatalities only. However, due to the small number of fatalities annually in NH among this population (usually less than 10/year), it was not appropriate to use fatalities in setting annual performance measures. This new objective has two benefits: first, it will capture a more significant aspect of the adverse health outcomes among adolescents resulting from motor vehicles crashes; and it will allow us to analyze and report annual population-based incidence rates.



SP(Reporting Year) # 6

**PERFORMANCE MEASURE:**

Percent of adolescents (ages 10-20) eligible for an EPSDT service who received an EPSDT service during the past year

**STATUS:**

Active

**GOAL**

To ensure Medicaid-eligible adolescents receive preventive health care services

**DEFINITION**

see numerator and denominator below

**Numerator:**

Total eligibles receiving at least one initial or periodic EPSDT screen

**Denominator:**

Total eligibles who should receive at least one initial or periodic EPSDT screen ("should" based on the state's periodicity schedule)

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

1-9: Reduce hospitalization rates for three ambulatory-care-sensitive conditions—pediatric asthma, u

14-27: Increase routine vaccination coverage levels for adolescents

**DATA SOURCES AND DATA ISSUES**

The data source is the State-Contracted Managed Care Organization Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Report (Form HCFA-416). Guidelines for collecting data for this measure are in lines 8 and 9 of the report. Medicaid-eligible individuals under the age of 21 are considered eligible for EPSDT services, regardless of whether they have been informed about the availability of EPSDT services or whether they accept EPSDT services at the time of informing.

**SIGNIFICANCE**

Insured adolescents are more likely to receive health care but insurance does not guarantee that adequate services are provided. Most adolescent morbidities are preventable and amenable to change with comprehensive screening services increasing the likelihood that problems are addressed early and often.

SP(Reporting Year) # 7

**PERFORMANCE MEASURE:**

Percent of center-based child care facilities in the MCH catchment area and serving children under age 2, that are visited at least once a month by a child care health consultant

**STATUS:**

Active

**GOAL**

To increase health and safety in child care

**DEFINITION**

Percent of center-based child care facilities serving any child under 2 years of age, that are visited at least once a month by a child care health consultant within the catchment area of the MCH Child Care Health Consultant (CCHC) contract

**Numerator:**

The number of center-based child care facilities receiving an on-site visit at least once per month by a child care health consultant

**Denominator:**

The number of center-based child care facilities in the MCH CCHC catchment area serving any child under 2 years of age

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Objective 15-13: Reduce deaths caused by unintentional injuries

**DATA SOURCES AND DATA ISSUES**

Child Care Licensing Bureau, child care health consultation contract reports. Only regional data will be collected through the contract reports.

**SIGNIFICANCE**

A child care health consultant, working together with child care providers, can help achieve the goal of providing a safe, healthy, and developmentally appropriate environment for young children.

**PERFORMANCE MEASURE:**

[REVISED]:The percent of CSHCN who are at risk for/are overweight or obese

**STATUS:**

Active

**GOAL**

To increase the number of CSHCN, with impaired mobility, who receive individualized education regarding proper nutrition and safe physical activity.

**DEFINITION**

The percent of CSHCN who are at a risk for/are overweight or obese (as determined by diagnosis and/or BMI criteria as established by the CDC).

**Numerator:**

Number of CSHCN served by the SMS Neuromotor clinic/DHMC spina bifida clinic with a medical diagnosis of being at risk for or being overweight/obese, or who meet the CDC BMI criteria (&gt;95th percentile).

**Denominator:**

Number of CSHCN served by the SMS Neuromotor clinic/DHMC spina bifida clinic.

**Units:** No    **Text:** Text**HEALTHY PEOPLE 2010 OBJECTIVE**

19-3 Reduce the proportion of children and adolescents who are overweight or obese.

**DATA SOURCES AND DATA ISSUES**

Diagnoses from caseload lists, SMS database information, Nutrition, Feeding &amp; Swallowing service notes.

**SIGNIFICANCE**

The percentage of children and adolescents in the state who are obese or overweight is higher than the national average and appears to be increasing; however, there is no substantive information regarding the CSHCN population. The most common source of data is the NHANES survey. According to the NHANES 1999-2002 the population of children with "limitations" who are at-risk-for overweight is 50.9% and who are overweight is 29.7%. However this study excluded children who were unable to weight bear and stand. Therefore, the indication is that CSHCN have significant numbers related to overweight and obesity issues but the population with impaired mobility are not clearly represented. This is important because the impact of overweight and obesity on the functional status of CSHCN who have mobility impairment is critical to their development of skills for independent living.

**PERFORMANCE MEASURE:**

[REVISED]: The percent of respite/childcare providers, serving medically and behaviorally complex children, who have participated in competence-based training.

**STATUS:**

Active

**GOAL**

To develop/implement a respite care training curriculum and competencies that identify core information basic to the broad needs of medically and behaviorally complex children.

**DEFINITION**

The percent of respite/childcare providers who have participated in competence-based training, who serve medically and behaviorally complex children.

**Numerator:**

Number of respite/childcare providers who have participated in competence-based training that serve medically and behaviorally complex children.

**Denominator:**

Number of respite/care providers who have participated in competency based training.

**Units:** No **Text:** Text

**HEALTHY PEOPLE 2010 OBJECTIVE**

N/A

**DATA SOURCES AND DATA ISSUES**

State Title V program checklists, surveys of stakeholder programs, program registration/attendance records.

**SIGNIFICANCE**

There is an identified lack of respite and child care available, by a trained work force, for medically and behaviorally complex children with special health care needs. The National Survey of CSHCN results for NH indicate that 37% (n=1,936) of the children that needed respite services, did not receive such services. The group reporting the need for respite constituted approximately 8% of New Hampshire CSHCN.

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: NH**

**Form Level Notes for Form 17**

None

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>14.7</u>	<u>17.2</u>	<u>17.1</u>	<u>15.5</u>	<u>19.1</u>
<b>Numerator</b>	<u>107</u>	<u>125</u>	<u>126</u>	<u>114</u>	<u>141</u>
<b>Denominator</b>	<u>72,789</u>	<u>72,789</u>	<u>73,500</u>	<u>73,548</u>	<u>73,650</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

**Is the Data Provisional or Final?**

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data is from the NH Asthma Control Program and is from New Hampshire Inpatient Hospital Discharge Data for 2007. The number does include the number of NH residents hospitalized in border states (ME, MA & VT). For the Denominator Health Statistics created a population table based on US Census and OEP estimates. Here is the citation for this table: Health Statistics and Data Management Section (HSDM), Bureau of Disease Control and Health Statistics (BDCHS), Division of Public Health Services (DPHS), New Hampshire Department of Health and Human Services (DHHS). Population data is based on US Census data apportioned to towns using New Hampshire Office of Economic Planning (OEP) estimates and projections, and further apportioned to age groups and gender using Claritas Corporation estimates and projections to the town, age group, and gender levels. Data adds to US Census data at the county level between 1990 and 2005 but does not add to OEP or Claritas data smaller geographic levels.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is from the NH Asthma Control Program and is from New Hampshire Inpatient Hospital Discharge Data for 2006. The number does include the number of NH residents hospitalized in border states (ME, MA & VT). For the Denominator Health Statistics created a population table based on US Census and OEP estimates. Here is the citation for this table: Health Statistics and Data Management Section (HSDM), Bureau of Disease Control and Health Statistics (BDCHS), Division of Public Health Services (DPHS), New Hampshire Department of Health and Human Services (DHHS). Population data is based on US Census data apportioned to towns using New Hampshire Office of Economic Planning (OEP) estimates and projections, and further apportioned to age groups and gender using Claritas Corporation estimates and projections to the town, age group, and gender levels. Data adds to US Census data at the county level between 1990 and 2005 but does not add to OEP or Claritas data smaller geographic levels.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is from the NH Asthma Control Program and is from New Hampshire Inpatient Hospital Discharge Data for 2005. It does capture the number of NH residents hospitalized in border states.

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>83.4</u>	<u>84.9</u>	<u>86.1</u>	<u>84.9</u>	<u>88.8</u>
<b>Numerator</b>	<u>4,430</u>	<u>4,776</u>	<u>4,929</u>	<u>4,983</u>	<u>5,305</u>
<b>Denominator</b>	<u>5,312</u>	<u>5,628</u>	<u>5,722</u>	<u>5,869</u>	<u>5,975</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

**1. Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data is from the 2009 416 report, via Maria Pliakos (ext. 7194) and Jackie Leone (ext 8169) in the Office of Medicaid Administration.

Part of NH SCHIP development was Medicaid expansion for infants (0-1), from 185% to 300% of poverty. Therefore the numbers for HSCI # 2 and HSCI # 3 are the same.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is from the 2008 416 report, via Maria Pliakos (ext. 7194) and Jackie Leone (ext 8169) in the Office of Medicaid Administration.

Part of NH SCHIP development was Medicaid expansion for infants (0-1), from 185% to 300% of poverty. Therefore the numbers for HSCI # 2 and HSCI # 3 are the same.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is from the 2007 416 report, via Maria Pliakos (ext. 7194) and Jackie Leone (ext 8169) in the Office of Medicaid Administration.

Part of NH SCHIP development was Medicaid expansion for infants (0-1), from 185% to 300% of poverty. Therefore the numbers for HSCI # 2 and HSCI # 3 are the same.

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>83.4</u>	<u>84.9</u>	<u>86.1</u>	<u>84.9</u>	<u>88.8</u>
<b>Numerator</b>	<u>4,430</u>	<u>4,776</u>	<u>4,929</u>	<u>4,983</u>	<u>5,305</u>
<b>Denominator</b>	<u>5,312</u>	<u>5,628</u>	<u>5,722</u>	<u>5,869</u>	<u>5,975</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Part of NH SCHIP development was Medicaid expansion for infants (0-1), from 185% to 300% of poverty. Therefore the numbers for HSCI # 2 and HSCI # 3 are the same.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Part of NH SCHIP development was Medicaid expansion for infants (0-1), from 185% to 300% of poverty. Therefore the numbers for HSCI # 2 and HSCI # 3 are the same.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #03

**Field Name:** HSC03

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Part of NH SCHIP development was Medicaid expansion for infants (0-1), from 185% to 300% of poverty. Therefore the numbers for HSCI # 2 and HSCI # 3 are the same.

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

		<b>Annual Indicator Data</b>			
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>81.7</u>	<u>84.0</u>	<u>85.8</u>	<u>85.3</u>	<u>85.3</u>
<b>Numerator</b>	<u>8,841</u>	<u>9,087</u>	<u>9,509</u>	<u>9,176</u>	<u>9,176</u>
<b>Denominator</b>	<u>10,819</u>	<u>10,823</u>	<u>11,079</u>	<u>10,757</u>	<u>10,757</u>
<b>Check this box if you cannot report the numerator because</b> <b>1. There are fewer than 5 events over the last year, and</b> <b>2. The average number of events over the last 3 years is fewer</b> <b>than 5 and therefore a 3-year moving average cannot be</b> <b>applied.</b> <i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**Field Level Notes****1. Section Number:** Form17\_Health Systems Capacity Indicator #04**Field Name:** HSC04**Row Name:****Column Name:****Year:** 2009**Field Note:**

Data is unavailable. Data from 2008 is used as an estimate.

Data is not comparable to years prior to 2005, due to the fact that the month prenatal care began is not collected after 2004. Instead, we collect the date of the first prenatal care visit and calculate the month of pregnancy in which prenatal care began by subtracting the date of the last menses. Moreover, this indicator is likely skewed downward for 2005-2007, for the following reason: out-of-state births to NH residents typically have an appropriately high score on the Kotelchuck Index. This is because complicated pregnancies, resulting in high prenatal care usage (i.e. many visits) tend to go to specialty centers outside of NH. In other words, it is reasonable to assume that, if the the out-of-state births were included in the data, the indicator for Kotelchuck would be higher.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #04**Field Name:** HSC04**Row Name:****Column Name:****Year:** 2008**Field Note:**

Birth records that did not have information for this measure were not included in the denominator.

Data includes multiple births, and is only for women 15-44.

Data is not comparable to years prior to 2005, due to the fact that the month prenatal care began is not collected after 2004. Instead, we collect the date of the first prenatal care visit and calculate the month of pregnancy in which prenatal care began by subtracting the date of the last menses. Moreover, this indicator is likely skewed downward for 2005-2007, for the following reason: out-of-state births to NH residents typically have an appropriately high score on the Kotelchuck Index. This is because complicated pregnancies, resulting in high prenatal care usage (i.e. many visits) tend to go to specialty centers outside of NH. In other words, it is reasonable to assume that, if the the out-of-state births were included in the data, the indicator for Kotelchuck would be higher.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #04**Field Name:** HSC04**Row Name:****Column Name:****Year:** 2007**Field Note:**

1574 birth records did not have information needed to do the necessary computations. These records were therefore not included in the denominator.

Data does not include out-of-state births (unavailable), includes multiple births, and is only for women 15-44.

Data is not comparable to years prior to 2005, due to the fact that the month prenatal care began is not collected after 2004. Instead, we collect the date of the first prenatal care visit and calculate the month of pregnancy in which prenatal care began by subtracting the date of the last menses. Moreover, this indicator is likely skewed downward for 2005-2007, for the following reason: out-of-state births to NH residents typically have an appropriately high score on the Kotelchuck Index. This is because complicated pregnancies, resulting in high prenatal care usage (i.e. many visits) tend to go to specialty centers outside of NH. In other words, it is reasonable to assume that, if the the out-of-state births were included in the data, the indicator for Kotelchuck would be higher.



**HEALTH SYSTEMS CAPACITY MEASURE # 07A**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>74.8</u>	<u>76.4</u>	<u>74.0</u>	<u>74.7</u>	<u>74.8</u>
<b>Numerator</b>	<u>71,350</u>	<u>74,571</u>	<u>72,906</u>	<u>74,917</u>	<u>84,384</u>
<b>Denominator</b>	<u>95,444</u>	<u>97,655</u>	<u>98,463</u>	<u>100,309</u>	<u>112,764</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes****1. Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2009**Field Note:**

The numerator was provided by Maria Pliakos (ext 7194) and Jackie Leone. Data for the denominator is the sum of two numbers: the number of 1 to 21 year olds enrolled/eligible for Medicaid plus 15,157, obtained by Christina Purdam of the DHHS Office of Planning and Research, from the 2001 DHHS Insurance Family Survey. The latter number is uninsured 0-18 year-olds that were eligible for Healthy Kids insurance. Although the two age groups used to determine the denominator do not match exactly, this methodology results in the most accurate estimate available.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2008**Field Note:**

The numerator was provided by Maria Pliakos (ext 7194) and Jackie Leone. Data for the denominator is the sum of two numbers: the number of 1 to 21 year olds enrolled/eligible for Medicaid plus 15,157, obtained by Christina Purdam of the DHHS Office of Planning and Research, from the 2001 DHHS Insurance Family Survey. The latter number is uninsured 0-18 year-olds that were eligible for Healthy Kids insurance. Although the two age groups used to determine the denominator do not match exactly, this methodology results in the most accurate estimate available.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2007**Field Note:**

The numerator was provided by Maria Pliakos (ext 7194) and Jackie Leone. Data for the denominator is the sum of two numbers: the number of 1 to 21 year olds enrolled/eligible for Medicaid plus 15,157, obtained by Christina Purdam of the DHHS Office of Planning and Research, from the 2001 DHHS Insurance Family Survey. The latter number is uninsured 0-18 year-olds that were eligible for Healthy Kids insurance. Although the two age groups used to determine the denominator do not match exactly, this methodology results in the most accurate estimate available.

**HEALTH SYSTEMS CAPACITY MEASURE # 07B**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2005	2006	<b>Annual Indicator Data</b>		
			2007	2008	2009
<b>Annual Indicator</b>	<u>48.1</u>	<u>56.3</u>	<u>57.6</u>	<u>61.7</u>	<u>64.7</u>
<b>Numerator</b>	<u>10,057</u>	<u>10,230</u>	<u>10,545</u>	<u>11,418</u>	<u>12,782</u>
<b>Denominator</b>	<u>20,900</u>	<u>18,170</u>	<u>18,321</u>	<u>18,506</u>	<u>19,742</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

**1. Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Data is from FY2009 416 report, obtained from Maria Pliakos (ext 7194) and Jackie Leone.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is from FY2008 416 report, obtained from Maria Pliakos (ext 7194) and Jackie Leone.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is from FY2007 416 report, obtained from Maria Pliakos (ext 7194) and Jackie Leone.

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>12.7</u>	<u>8.9</u>	<u>9.5</u>	<u>13.0</u>	<u>12.8</u>
<b>Numerator</b>	<u>193</u>	<u>145</u>	<u>166</u>	<u>243</u>	<u>244</u>
<b>Denominator</b>	<u>1,514</u>	<u>1,636</u>	<u>1,741</u>	<u>1,866</u>	<u>1,912</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

The Denominator is the number of recipients of SSI under age 16 in December 2009 - as reported from the SSA December 2008 report - table titled "Number of children under age 16 receiving federally administered SSI payments. The Numerator utilized was determined by reviewing the total number served by SMS in FY 2009 and determining those children with SSI. There have been continued improvements in the SMS Database and the numerator is the number of unduplicated children served by SMS who had SSI and are <16 by 12/31/2009.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The Denominator is the number of recipients of SSI under age 16 in December 2008 - as reported from the SSA December 2008 report - table titled "Number of children under age 16 receiving federally administered SSI payments. The Numerator utilized was determined by reviewing the total number served by SMS in FY 2008 and determining those children with SSI. The SMS database limits our ability to match December 2008 as the cut off date - therefore the numerator was calculated as of the end of the Fiscal Year (June 30, 2008). The increase in the percentage served could be related to expanded efforts to outreach to new SSI enrollees as well as improvements in the SMS Database.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

The numerator is specifically those under the age of 16 as of 12/31/07 and the denominator is the number of recipients of SSI as reported from a SSA December 2007 report and a table titled "Number of children under age 16 receiving federally administered SSI payments"



**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: NH**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2008	Payment source from birth certificate	<u>7.2</u>	<u>5.4</u>	<u>6.5</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Payment source from birth certificate	<u>7.4</u>	<u>2.9</u>	<u>4.1</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2008	Payment source from birth certificate	<u>69.9</u>	<u>88.3</u>	<u>82.7</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2008	Payment source from birth certificate	<u>78.3</u>	<u>88.5</u>	<u>85.3</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)**  
**STATE: NH**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL MEDICAID</b> (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2009	<div style="text-align: right;">300</div>
b) <i>Medicaid Children</i> (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">1</div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;">19</div> ) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div> ) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black; text-align: center;"></div> )	2009	<div style="text-align: right;">185</div> <div style="text-align: right;"><div style="border-bottom: 1px solid black; width: 40px;"></div></div> <div style="text-align: right;"><div style="border-bottom: 1px solid black; width: 40px;"></div></div>
c) <i>Pregnant Women</i>	2009	<div style="text-align: right;">185</div>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)**  
**STATE: NH**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) <i>Infants (0 to 1)</i>	2009	<div style="text-align: right;">300</div>
b) <i>Medicaid Children</i> (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black;"></div> 1 to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black;"></div> 19 ) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black;"></div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black;"></div> ) (Age range <div style="display: inline-block; width: 40px; border-bottom: 1px solid black;"></div> to <div style="display: inline-block; width: 40px; border-bottom: 1px solid black;"></div> )	2009	<div style="text-align: right;">400</div> <div style="text-align: right;"><div style="border-bottom: 1px solid black; width: 40px;"></div></div> <div style="text-align: right;"><div style="border-bottom: 1px solid black; width: 40px;"></div></div>
c) <i>Pregnant Women</i>	2009	<div style="text-align: right;">400</div>

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

1.

Section Number:

Form18\_Indicator 05

Field Name:

InfantDeath

Row Name:

Infant deaths per 1,000 live births

Column Name:

Year:

2011

Field Note:

2007 is the most recent data available.
2.

Section Number:

Form18\_Indicator 05

Field Name:

CareFirstTrimester

Row Name:

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

Column Name:

Year:

2011

Field Note:

Note



**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: NH**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

<b>DATABASES OR SURVEYS</b>	<b>Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *</b>	<b>Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)</b>
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	3	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	1	No

\*Where:

1 = No, the MCH agency does not have this ability.

2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.

3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: NH**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other: NH Youth Tobacco Survey	3	Yes
Behavioral Risk Factor Surveillance Survey	3	Yes

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**  
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

1. **Section Number:** Form19\_Indicator 09A
- Field Name:** Discharge
- Row Name:** Hospital discharge survey for at least 90% of in-State discharges
- Column Name:**
- Year:** 2011
- Field Note:**  
We have electronic access to the Uniform Hospital Discharge Data Set (UHDDS).

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: NH**

**Form Level Notes for Form 20**

None

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2005	2006	2007	2008	2009
Annual Indicator	6.3	6.4	5.8	6.5	6.5
Numerator	800	817	736	890	890
Denominator	12,780	12,788	12,688	13,665	13,665

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer  
than 5 and therefore a 3-year moving average cannot be  
applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Data is unavailable. Data from 2008 is used as an estimate.
- Section Number:** Form20\_Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data does not include out-of-state births (unavailable).

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

		Annual Indicator Data				
	2005	2006	2007	2008	2009	
Annual Indicator	4.5	4.3	4.6	4.5	4.5	
Numerator	558	528	558	585	585	
Denominator	12,314	12,257	12,262	13,099	13,099	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2.The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Final	Provisional	

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #01B  
**Field Name:** HSI01B  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Data is unavailable. Data from 2008 is used as an estimate.
- Section Number:** Form20\_Health Status Indicator #01B  
**Field Name:** HSI01B  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Does not include out-of-state births (unavailable for 2007).

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

		<b>Annual Indicator Data</b>			
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>1.1</u>	<u>1.0</u>	<u>0.9</u>	<u>0.8</u>	<u>1.1</u>
<b>Numerator</b>	<u>136</u>	<u>129</u>	<u>118</u>	<u>104</u>	<u>145</u>
<b>Denominator</b>	<u>12,780</u>	<u>12,767</u>	<u>12,673</u>	<u>12,369</u>	<u>13,665</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
 Out-of-state births not included (unavailable for 2009).
- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Out-of-state births not included (unavailable for 2008).
- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Out-of-state births not included (unavailable for 2007).

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>0.7</u>	<u>0.6</u>	<u>0.7</u>	<u>0.7</u>	<u>0.7</u>
<b>Numerator</b>	<u>88</u>	<u>71</u>	<u>86</u>	<u>87</u>	<u>87</u>
<b>Denominator</b>	<u>12,314</u>	<u>12,257</u>	<u>12,262</u>	<u>13,099</u>	<u>13,099</u>

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2009  
**Field Note:**  
Data is unavailable. Data from 2008 is used as an estimate.
- Section Number:** Form20\_Health Status Indicator #02B  
**Field Name:** HSI02B  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Out-of-state births not included (unavailable for 2007).

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>3.3</u>	<u>3.3</u>	<u>4.1</u>	<u>5.4</u>	<u>5.4</u>
<b>Numerator</b>	<u>8</u>	<u>8</u>	<u>10</u>	<u>13</u>	<u>13</u>
<b>Denominator</b>	<u>245,896</u>	<u>243,822</u>	<u>241,716</u>	<u>239,613</u>	<u>239,613</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2009 data is unavailable, so 2008 data is used.

2008 data is provisional due to incompleteness of data from out-of-state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

2. **Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data is provisional due to incompleteness of data from out-of-state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

3. **Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.



**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	Annual Indicator Data				
	2005	2006	2007	2008	2009
Annual Indicator	0	0	1	1	1
Numerator					
Denominator					
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.			Yes	Yes	Yes
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2009**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

At the annual federal review in August, 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events and when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**2. Section Number:** Form20\_Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2008**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

At the annual federal review in August, 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events and when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**3. Section Number:** Form20\_Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2007**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

At the annual federal review in August, 2009, it was decided that it would be more appropriate for NH to use the small numbers box than to use the Standard Ratio Methodology as outlined in the Block Grant guidance. Note: the small numbers box is used when "there are fewer than 5 events and when the average number of events over the last 3 years is fewer than 5, and therefore a 3-year moving average cannot be applied".

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>6.0</u>	<u>8.0</u>	<u>6.8</u>	<u>10.2</u>	<u>10.2</u>
<b>Numerator</b>	<u>11</u>	<u>15</u>	<u>13</u>	<u>20</u>	<u>20</u>
<b>Denominator</b>	<u>183,353</u>	<u>187,372</u>	<u>191,336</u>	<u>195,306</u>	<u>195,306</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

**Is the Data Provisional or Final?**

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2009 data is unavailable; 2008 provisional data is used as an estimate.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**2. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data is provisional due to the incompleteness of out-of-state data.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**3. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>113.1</u>	<u>127.6</u>	<u>128.7</u>	<u>129.8</u>	<u>129.8</u>
<b>Numerator</b>	<u>278</u>	<u>311</u>	<u>311</u>	<u>311</u>	<u>311</u>
<b>Denominator</b>	<u>245,896</u>	<u>243,822</u>	<u>241,716</u>	<u>239,613</u>	<u>239,613</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

**Is the Data Provisional or Final?**

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2009 data is unavailable. 2008 is used as an estimate.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**2. Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2007 and 2008 data is incomplete for NH residents who received treatment out of state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**3. Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2007 and 2008 data is incomplete for NH residents who received treatment out of state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>6.9</u>	<u>6.6</u>	<u>5.8</u>	<u>2.5</u>	<u>5.8</u>
<b>Numerator</b>	<u>17</u>	<u>16</u>	<u>14</u>	<u>6</u>	<u>14</u>
<b>Denominator</b>	<u>245,896</u>	<u>243,822</u>	<u>241,716</u>	<u>239,613</u>	<u>241,716</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2007 is the most recent year for which complete data is available. Therefore, this has been used as an estimate for 2009 (there is no provisional data for 2009).

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

2. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data does not include NH residents who received treatment out of state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

3. **Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>93.3</u>	<u>91.3</u>	<u>73.2</u>	<u>36.4</u>	<u>73.2</u>
<b>Numerator</b>	<u>171</u>	<u>171</u>	<u>140</u>	<u>71</u>	<u>140</u>
<b>Denominator</b>	<u>183,353</u>	<u>187,372</u>	<u>191,336</u>	<u>195,306</u>	<u>191,336</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

2009 provisional data is not available. Therefore, 2007 complete data is used as an estimate.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**2. Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data does not include NH residents who received treatment out of state.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**3. Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>11.2</u>	<u>11.7</u>	<u>12.0</u>	<u>12.0</u>	<u>10.6</u>
<b>Numerator</b>	<u>528</u>	<u>550</u>	<u>562</u>	<u>563</u>	<u>499</u>
<b>Denominator</b>	<u>46,969</u>	<u>46,955</u>	<u>46,955</u>	<u>46,955</u>	<u>46,955</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Numerator is from Heather Barto (3932) and Dana Hull, Communicable Disease Surveillance Section.

Denominator is from the US Bureau of the Census, Estimates Branch.

**2. Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Numerator is from Heather Barto (3932) and Dana Hull, Communicable Disease Surveillance Section.

Denominator is from the US Bureau of the Census, Estimates Branch.

**3. Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Numerator is from Heather Barto, Communicable Disease Surveillance Section, 271-3932.

Denominator is from the US Bureau of the Census, Estimates Branch.

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	<b>Annual Indicator Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Indicator</b>	<u>3.5</u>	<u>3.3</u>	<u>4.4</u>	<u>4.6</u>	<u>4.7</u>
<b>Numerator</b>	<u>788</u>	<u>736</u>	<u>953</u>	<u>1,008</u>	<u>1,025</u>
<b>Denominator</b>	<u>222,334</u>	<u>220,289</u>	<u>217,692</u>	<u>217,692</u>	<u>217,692</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2009

**Field Note:**

Numerator is from Heather Barto (3932) and Dana Hull, Communicable Disease Surveillance Section.

Denominator is from the US Bureau of the Census, Estimates Branch.

**2. Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Numerator is from Heather Barto (3932) and Dana Hull, Communicable Disease Surveillance Section.

Denominator is from the US Bureau of the Census, Estimates Branch.

**3. Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Numerator is from Heather Barto (3932) and Dana Hull, Communicable Disease Surveillance Section.

Denominator is from the US Bureau of the Census, Estimates Branch.





**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NH**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2007    Is this data from a State Projection? Yes    Is this data final or provisional? Final

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	14,260	13,162	286	48	395	6	363	0
Children 1 through 4	60,865	55,820	1,527	155	1,856	30	1,477	0
Children 5 through 9	78,400	72,477	1,913	218	2,009	28	1,755	0
Children 10 through 14	87,081	82,191	1,495	219	1,560	37	1,579	0
Children 15 through 19	93,691	89,561	1,325	290	1,343	40	1,132	0
Children 20 through 24	82,705	78,622	1,079	340	1,493	39	1,132	0
Children 0 through 24	417,002	391,833	7,625	1,270	8,656	180	7,438	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	13,728	532	0
Children 1 through 4	58,621	2,244	0
Children 5 through 9	75,433	2,967	0
Children 10 through 14	84,271	2,810	0
Children 15 through 19	91,137	2,554	0
Children 20 through 24	80,333	2,372	0
Children 0 through 24	403,523	13,479	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NH**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2008    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	4	4	0	0	0	0	0	0
Women 15 through 17	212	186	0	0	0	0	8	18
Women 18 through 19	691	620	12	1	0	1	9	48
Women 20 through 34	10,427	9,348	151	10	380	7	80	451
Women 35 or older	2,350	2,100	41	7	96	2	26	78
Women of all ages	13,684	12,258	204	18	476	10	123	595

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	4	0	0
Women 15 through 17	178	24	10
Women 18 through 19	601	51	39
Women 20 through 34	8,991	404	1,032
Women 35 or older	1,956	63	331
Women of all ages	11,730	542	1,412

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NH**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Final

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	80	73	4	1	0	1	1	0
Children 1 through 4	12	11	0	0	0	0	1	0
Children 5 through 9	10	10	0	0	0	0	0	0
Children 10 through 14	13	11	1	0	1	0	0	0
Children 15 through 19	41	40	0	0	0	0	0	1
Children 20 through 24	69	68	1	0	0	0	0	0
Children 0 through 24	225	213	6	1	1	1	2	1

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	79	1	3
Children 1 through 4	11	1	0
Children 5 through 9	10	0	0
Children 10 through 14	13	0	0
Children 15 through 19	41	0	0
Children 20 through 24	68	1	1
Children 0 through 24	222	3	4

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NH**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Final

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	334,516	313,211	6,546	930	7,163	141	6,525	0	2007
Percent in household headed by single parent	20.0	19.5	40.0	32.0	11.2	29.5	29.3	35.0	2006
Percent in TANF (Grant) families	2.9	2.9	8.0	2.1	1.9	5.7	0.0	0.0	2009
Number enrolled in Medicaid	94,607	89,474	3,252	92	1,000	69	0	720	2009
Number enrolled in SCHIP	83,021	80,021	2,200	100	600	100	0	0	2009
Number living in foster home care	893	788	64	9	3	4	25	0	2009
Number enrolled in food stamp program	44,658	42,115	2,075	45	384	32	0	7	2009
Number enrolled in WIC	20,079	17,906	826	169	398	398	382	0	2009
Rate (per 100,000) of juvenile crime arrests	1,450.0	1,450.0	1,450.0	1,450.0	1,450.0	1,450.0	1,450.0	1,450.0	2009
Percentage of high school drop-outs (grade 9 through 12)	1.7	1.7	1.7	1.7	1.7	1.7	1.7	1.7	2009

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	323,409	11,107	0	2007
Percent in household headed by single parent	19.6	33.0	0.0	2006
Percent in TANF (Grant) families	2.7	6.5	0.0	2009
Number enrolled in Medicaid	88,226	5,661	720	2009
Number enrolled in SCHIP	0	0	83,021	2009
Number living in foster home care	818	75	0	2009
Number enrolled in food stamp program	41,699	3,328	0	2009
Number enrolled in WIC	0	0	20,079	2009
Rate (per 100,000) of juvenile crime arrests	1,450.0	1,450.0	1,450.0	2009
Percentage of high school drop-outs (grade 9 through 12)	1.7	1.7	1.7	2009

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NH**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	<u>0</u>
Living in urban areas	<u>202,207</u>
Living in rural areas	<u>132,309</u>
Living in frontier areas	<u>0</u>
<b>Total - all children 0 through 19</b>	<u>334,516</u>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21  
HEALTH STATUS INDICATORS  
DEMOGRAPHIC DATA  
STATE: NH

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	1,315,809.0
Percent Below: 50% of poverty	2.0
100% of poverty	5.7
200% of poverty	19.1

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: NH**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	<u>334,516.0</u>
Percent Below: 50% of poverty	<u>2.0</u>
100% of poverty	<u>7.8</u>
200% of poverty	<u>19.1</u>

## FORM NOTES FOR FORM 21

None

### FIELD LEVEL NOTES

1. **Section Number:** Form21\_Indicator 09A  
**Field Name:** HSIRace\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
Race numbers are estimated.
2. **Section Number:** Form21\_Indicator 09A  
**Field Name:** HSIRace\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
Race and ethnicity data for juvenile arrests is unavailable or unreliable.
3. **Section Number:** Form21\_Indicator 09A  
**Field Name:** HSIRace\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
Race information is not available.
4. **Section Number:** Form21\_Indicator 09B  
**Field Name:** HSIEthnicity\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2011  
**Field Note:**  
Race information not available.



**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: NH**

**Form Level Notes for Form 11**

None

**STATE PERFORMANCE MEASURE # 1 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015**

The rate of psychotherapy visits for adolescents ages 12-18 years, with a diagnosed mental health disorder

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Data Source	<input type="text"/>				
Is the Data Provisional or Final?	<input type="text"/>				

  

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual Indicator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Numerator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Denominator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

**Field Level Notes**

None

# STATE PERFORMANCE MEASURE # 2 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percent of 3rd grade children who are overweight or obese

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

## Field Level Notes

None

# STATE PERFORMANCE MEASURE # 3 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percent of 18-25 year olds reporting binge alcohol use in the past month

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

## Field Level Notes

None

**STATE PERFORMANCE MEASURE # 4 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015**

Percent of Community Health Centers providing on-site behavioral health services

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

**Field Level Notes**

None

# STATE PERFORMANCE MEASURE # 5 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

The percent of parents who self-report that they completed a standardized, validated screening tool used to identify children at risk for developmental, behavioral or social delays

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

## Field Level Notes

None

**STATE PERFORMANCE MEASURE # 6 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015**

The rate (per 100,000) of emergency department visits among youths aged 15-19 resulting from being an occupant in a motor vehicle crash

	<b>Annual Objective and Performance Data</b>				
	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
<b>Annual Performance Objective</b>	2,500	2,300	2,300	2,200	2,100
<b>Annual Indicator</b>	2,207.6	1,807.3	1,807.3	1,807.3	
<b>Numerator</b>	2,114	1,753	1,753	1,753	
<b>Denominator</b>	95,761	96,995	96,995	96,995	
<b>Data Source</b>				Vital Records	
<b>Is the Data Provisional or Final?</b>				Provisional	

	<b>Annual Objective and Performance Data</b>				
	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>
<b>Annual Performance Objective</b>	2,000	1,900	1,800	1,700	
<b>Annual Indicator</b>					
<b>Numerator</b>					
<b>Denominator</b>					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2008**Field Note:**

Provisional data for 2008 is not available. Therefore, the latest provisional data, from 2006, is used as the indicator.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**2. Section Number:** Form11\_State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2007**Field Note:**

Provisional data for 2007 is not available. Therefore, the latest provisional data, from 2006, is used as the indicator for 2007.

Starting with the year 2005, NH is using the following document as guidance for injury data:

Johnson RL, Thomas KE, Sarmiento K. State Injury Indicators: Instructions for Preparing 2005 Data. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.

**STATE PERFORMANCE MEASURE # 7 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015**

Percent of households identified with environmental risks that receive healthy homes assessments.

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

<u>Annual Objective and Performance Data</u>					
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 8 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015**

The percent of public water systems that optimally fluoridate the water system on a monthly basis.

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator	_____	_____	_____	_____	_____
Numerator	_____	_____	_____	_____	_____
Denominator	_____	_____	_____	_____	_____
Data Source					
Is the Data Provisional or Final?					

	<u>Annual Objective and Performance Data</u>				
	2010	2011	2012	2013	2014
Annual Performance Objective	_____	_____	_____	_____	_____
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

**Field Level Notes**

None



# STATE PERFORMANCE MEASURE # 9 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Percent of families with children/youth diagnosed with SED, moving into permanency placement through DCYF, who have access to a trained respite provider for up to 50 hours during the first year

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective	36	36	36	36	36
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

## Field Level Notes

None

# STATE PERFORMANCE MEASURE # 10 - NEW FOR NEEDS ASSESSMENT CYCLE 2011-2015

Of women who had a preterm birth: Percent who reported smoking before pregnancy

	Annual Objective and Performance Data				
	2005	2006	2007	2008	2009
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					
Data Source					
Is the Data Provisional or Final?					

	Annual Objective and Performance Data				
	2010	2011	2012	2013	2014
Annual Performance Objective					
Annual Indicator					
Numerator					
Denominator					

While you may enter preliminary objectives for State Performance Measures for the Needs Assessment Period 2011-2015, this is not required until next year.

## Field Level Notes

None



**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
*[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]*  
**STATE: NH**

**Form Level Notes for Form 12**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: NH**

SP(New for Needs Assessment cycle 2011-2015) # 1

**PERFORMANCE MEASURE:** The rate of psychotherapy visits for adolescents ages 12-18 years, with a diagnosed mental health disorder

**STATUS:** Active

**GOAL:** Improve access to mental health services for children

**DEFINITION:** see numerator and denominator below

**Numerator:**  
Number of Medicaid enrolled adolescents, aged 12-18, with a diagnosed mental health disorder that received at least one psychotherapy visit, as per Medicaid claims data

**Denominator:**  
Total number of Medicaid enrolled adolescents, aged 12-18, with a diagnosed mental health disorder

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES** NH Office of Medicaid Business and Policy, Medicaid Claims Data

**SIGNIFICANCE** Mental health disorders have far reaching implications for the children affected with them. They can impact a child's emotional, intellectual, and behavioral development and can hinder proper family and social relationships. If left untreated, mental disorders can persist through development and into adulthood. Access to mental health services continues to be an identified need in New Hampshire, and the need for these services is great. In New Hampshire, the Medicaid population presents with twice the service use prevalence for mental health services compared to privately insured children. In rural areas, the prevalence of children with mental disorders is similar to that in urban areas, but there are increased barriers to care, resulting in delayed treatment.

<b>PERFORMANCE MEASURE:</b>	Percent of 3rd grade children who are overweight or obese
<b>STATUS:</b>	Active
<b>GOAL</b>	To reduce the proportion of children who are overweight or obese
<b>DEFINITION</b>	<p>For children of the same age and sex, according to the Centers for Disease Control: Overweight is defined as a BMI &gt; 85%ile and &lt; 95%ile. Obesity is defined as a BMI &gt; 95%ile.</p> <p><b>Numerator:</b> Number of NH third grade students with Body Mass Index percentile at or over 85</p> <p><b>Denominator:</b> Number of NH third grade students screened to determine a Body Mass Index</p> <p><b>Units:</b> 100    <b>Text:</b> Percent</p>
<b>HEALTHY PEOPLE 2010 OBJECTIVE</b>	Objective # 19 –3a, Reduce the proportion of children aged 6 to 11 years who are overweight or obese
<b>DATA SOURCES AND DATA ISSUES</b>	Third Grade Healthy Smiles – Healthy Growth Survey, NH Dept. of Health and Human Services , Div. Of Public Health Services, Bureau of Prevention Services. This survey is done every five years.
<b>SIGNIFICANCE</b>	Children who are overweight or obese are at higher risk for having a myriad of physical and emotional health problems during their childhood years and as they age. Rates for overweight and obese children are rising nationally and locally. Action needs to be taken on a national, state, community, and family level. Health care professionals can use the BMI as a tool with families to monitor weight and educate about strategies that promote a healthy lifestyle.

<b>PERFORMANCE MEASURE:</b>	Percent of 18-25 year olds reporting binge alcohol use in the past month
<b>STATUS:</b>	Active
<b>GOAL</b>	To decrease the use and abuse of alcohol among young adults
<b>DEFINITION</b>	<p>Binge alcohol use is defined as drinking five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least 1 day in the past 30 days.</p> <p><b>Numerator:</b> Weighted total number 18-25 year olds reporting binge drinking, consuming five or more drinks on the same occasion on at least 1 day in the past 30 days</p> <p><b>Denominator:</b> Weighted total number of respondents</p> <p><b>Units:</b> 100    <b>Text:</b> Percent</p>
<b>HEALTHY PEOPLE 2010 OBJECTIVE</b>	N/A
<b>DATA SOURCES AND DATA ISSUES</b>	The 2008 National Survey on Drug Use and Health (NSDUH) is part of a coordinated 5-year sample design providing estimates for all 50 States plus the District of Columbia for the years 2005 through 2009. The respondent universe is the civilian, noninstitutionalized population aged 12 years old or older residing within the United States. The data collection method used in NSDUH involves in-person interviews with sample persons, incorporating procedures that would be likely to increase respondents' cooperation and willingness to report honestly about their illicit drug use behavior. Confidentiality is stressed in all written and oral communications with potential respondents.
<b>SIGNIFICANCE</b>	Young adults use alcohol differently than other groups. New Hampshire is among the top 10 states for the percent of teens abusing alcohol. Fifty percent of New Hampshire high school students report current alcohol use and 28 percent report binge drinking. New Hampshire 18-25 year olds experienced higher rates of substance abuse (27.1 percent vs. 20.0 percent) and more unmet need for treatment than the US. SAMHSA. 2005-2006 National Survey of Drug Use and Health (NSDUH) Fifty-one percent of these youth report binge drinking. SAMSHA. 2005-2006 National Survey of Drug Use and Health (NSDUH).

**PERFORMANCE MEASURE:** Percent of Community Health Centers providing on-site behavioral health services

**STATUS:** Active

**GOAL** To improve access to behavioral health services in NH

**DEFINITION** See numerator and denominator below

**Numerator:**  
Number of Title V-supported Community Health Centers with documented, on-site behavioral health services

**Denominator:**  
Total number of Title V- supported Community Health Centers

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES** Data source is current NH Title V program data. As a requirement of funding, all Title V-supported community health centers provide documentation that describes the level to which behavioral health services are (or are not) provided on-site at their clinics.

**SIGNIFICANCE** Because New Hampshire's Title V program is charged with a contractual oversight of the state's community health centers, it has the unique opportunity to help shape the infrastructure of this system of care for all MCH populations. Using a funding methodology that rewards agencies for increasing their level of integration, Title V will measure progress in this priority by monitoring the number of agencies that choose to provide on-site behavioral health care, thereby increasing access to care for more populations.



**PERFORMANCE MEASURE:**

The percent of parents who self-report that they completed a standardized, validated screening tool used to identify children at risk for developmental, behavioral or social delays

**STATUS:**

Active

**GOAL**

To improve access to, and use of, standardized developmental screening for young children

**DEFINITION**

See numerator and denominator below

**Numerator:**

Number of parents surveyed that reported that they completed a standardized, validated screening tool used to identify children at risk for developmental, behavioral or social delays.

**Denominator:**

Number of parents surveyed

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

CDC National Survey of Children's Health This survey, sponsored by the Maternal and Child Health Bureau, examines the physical and emotional health of children ages 0-17 years of age.

**SIGNIFICANCE**

The impact of early identification and intervention for children with Autism Spectrum Disorders and other developmental delays has been well documented to have positive effects on school performance. New Hampshire is expanding its capacity to provide developmental screening for young children through a broader spectrum of providers including pediatricians and innovative family support programs. But, there is a significant amount of work to be done. However, there is no easy way to determine how often developmental screens are completed with young families. Billing codes are not useful because screening is often part of a bundled code within a preventative health visit. The National Survey of Children's Health allows us, then, to monitor the percent of parents who self-report that they completed a validated developmental screening tool for their child. Although this may not capture all of the screening, it will help us develop a baseline for future evaluation and analysis.

**PERFORMANCE MEASURE:**

The rate (per 100,000) of emergency department visits among youths aged 15-19 resulting from being an occupant in a motor vehicle crash

**STATUS:**

Active

**GOAL**

To reduce injuries among adolescents, aged 15-19, associated with being an occupant in a motor vehicle crash.

**DEFINITION**

see numerator and denominator below

**Numerator:**

Number of adolescents age 15-19 seen in an emergency department as a result of injuries associated with being an occupant in a motor vehicle crash.

**Denominator:**

Number of adolescents ages 15-19

**Units:** 100000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

NH Bureau of Health Statistics and Data Management

**SIGNIFICANCE**

Motor vehicle crashes are a leading cause of death and injuries among adolescents. Previously we had a state measure (#3, now inactive) which addressed fatalities only. However, due to the small number of fatalities annually in NH among this population (usually less than 10/year), it was not appropriate to use fatalities in setting annual performance measures. This new objective has two benefits: first, it will capture a more significant aspect of the adverse health outcomes among adolescents resulting from motor vehicles crashes; and it will allow us to analyze and report annual population-based incidence rates.

<b>PERFORMANCE MEASURE:</b>	Percent of households identified with environmental risks that receive healthy homes assessments.
<b>STATUS:</b>	Active
<b>GOAL</b>	To reduce exposure to lead hazards, asthma triggers and other environmental hazards to assure safe and healthy home environments.
<b>DEFINITION</b>	<p>See numerator and denominator below. Households with environmental risks are defined as those having at least one child with an elevated blood lead level and those households that are subsidiary rental dwelling units of the property where that child resides. In future years, the denominator may also include households identified through referrals from housing authorities, home visiting programs, health care providers and others.</p> <p><b>Numerator:</b> Number of households (from the denominator) that received Healthy Homes assessments (to include education and a remedial plan to reduce the risks)</p> <p><b>Denominator:</b> Number of households identified with environmental risks</p> <p><b>Units:</b> 100    <b>Text:</b> Percent</p>

#### HEALTHY PEOPLE 2010 OBJECTIVE

#### DATA SOURCES AND DATA ISSUES

CDC's Healthy Homes & Lead Poisoning Surveillance System (HHPSS). Unfortunately, no survey follows children from screening to intervention leaving little data on the outcomes of developmental screening.

#### SIGNIFICANCE

A growing body of evidence links housing conditions to health outcomes such as asthma, lead poisoning, lung cancer, and unintentional injuries. This shift to a holistic, coordinated approach will assess multiple potential risks or hazards within a home, provide safety and health promotion information during home visits, and work toward coordination of referrals and follow-up. This move toward "healthy homes" is in concert with federal initiatives to approach housing-related hazards and deficiencies in a coordinated and comprehensive way to prevent disease and injury. This approach also reflects a more efficient and effective use of existing resources.

**PERFORMANCE MEASURE:** The percent of public water systems that optimally fluoridate the water system on a monthly basis.

**STATUS:** Active

**GOAL** To improve oral health

**DEFINITION** Fluoridating optimally means within the CDC recommended range 12 months out of the year

**Numerator:**  
Number of public water systems that fluoridate optimally

**Denominator:**  
Number of public water systems that add fluoride

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** Increase to 75% the proportion of the U.S. population served by community water systems with optimal

**DATA SOURCES AND DATA ISSUES** Monthly reports sent to the NH Department of Environmental Services from fluoridated public water systems.

**SIGNIFICANCE** Community water fluoridation is the procedure of adjusting the natural fluoride concentration of a community's water supply to a level that is best for the prevention of dental decay. In the United States, community water fluoridation has been the basis for the primary prevention of dental decay for nearly 65 years and has been recognized as 1 of 10 great achievements in public health of the 20th century. It is an ideal public health method because it is effective, eminently safe, inexpensive, requires no cooperative effort or direct action, and does not depend on access or availability of professional services. Water fluoridation reduces or eliminates disparities in preventing dental caries among different socioeconomic, racial, and ethnic groups. Fluoridation helps to lower the cost of dental care and dental insurance and helps residents retain their teeth throughout life.

**PERFORMANCE MEASURE:**

Percent of families with children/youth diagnosed with SED, moving into permanency placement through DCYF, who have access to a trained respite provider for up to 50 hours during the first year

**STATUS:**

Active

**GOAL**

To develop/implement a respite care training curriculum and competencies that identify core information basic to the broad needs of medically and behaviorally complex children. Facilitated by an updated list of respite providers who have completed the competency based training with families reporting satisfaction with respite resources.

**DEFINITION**

The percent of respite/childcare providers who have participated in competence-based training, who serve medically and behaviorally complex children.

**Numerator:**

Number of families of children/youth with SED moving into permanency placement through DCYF, who have access to trained respite providers

**Denominator:**

Number of families of children/youth with SED moving into permanency placement through DCYF

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Lifespan Respite coalition data from pilot program, Data from the Lifespan Respite Locator data system, and program registration/attendance records.

**SIGNIFICANCE**

There is an identified lack of respite and child care available, by a trained work force, for medically and behaviorally complex children with special health care needs. The National Survey of CSHCN results for NH indicate that 45% (n=1,237) of the children that needed respite services, did not receive such services. The group reporting the need for respite constituted approximately 6% of New Hampshire CSHCN. In particular, the availability of respite is critical for CSHCN who have been removed from their homes and are either being reunified with their natural families or moving into other permanent placement.

**PERFORMANCE MEASURE:**

Of women who had a preterm birth: Percent who reported smoking before pregnancy

**STATUS:**

Active

**GOAL**

To decrease the incidence of preterm births, particularly the impact of smoking on preterm births. In other words, we hope to reduce the proportion of preterm births where smoking occurred.

**DEFINITION**

See numerator and denominator below

**Numerator:**

Number of women having a preterm birth who smoked before pregnancy

**Denominator:**

Number of women who had a preterm birth

**Units:** 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

27 - Reduce tobacco use; 16 - Maternal and Child Health

16-17 Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women 16-11 Reduce preterm births

**DATA SOURCES AND DATA ISSUES**

Birth certificate - Vital Records

**SIGNIFICANCE**

Smoking nearly doubles a woman's risk of having a low-birthweight baby. In 2004, 11.9 percent of babies born to smokers in the United States were of low birthweight (less than 5½ pounds), compared to 7.2 percent of babies of nonsmokers (1). Low birthweight can result from poor growth before birth, preterm delivery or a combination of both. Smoking has long been known to slow fetal growth. Smoking also increases the risk of preterm delivery (before 37 weeks of gestation) (5). Premature and low-birthweight babies face an increased risk of serious health problems during the newborn period, chronic lifelong disabilities (such as cerebral palsy, mental retardation and learning problems), and even death. The more a pregnant woman smokes, the greater her risk of having a low-birthweight baby. However, if a woman stops smoking even by the end of her second trimester of pregnancy, she is no more likely to have a low-birthweight baby than a woman who never smoked (6). A recent study suggests that women who smoke anytime during the month before pregnancy to the end of the first trimester are more likely to have a baby with birth defects, particularly congenital heart defects (7). The risk of heart defects appears to increase with the number of cigarettes a woman smokes. - From the March of Dimes website

